



HEALTH SERVICE BOARD
CITY & COUNTY OF SAN FRANCISCO

Minutes

Regular Meeting

Thursday, June 14, 2018

1:00 PM

City Hall, Room 416
1 Dr. Carlton B. Goodlett Place
San Francisco, California 94103

- Call to order
- Pledge of allegiance
- Roll call President Randy Scott
 Vice President Wilfredo Lim
 Commissioner Karen Breslin
 Commissioner Sharon Ferrigno
 Commissioner Stephen Follansbee, M.D., excused
 Commissioner Gregg Sass
 Supervisor Jeff Sheehy, excused

This Health Service Board meeting was recorded live by SFGovTV. Links to videotaped meetings and related materials are posted on the myhss.org website.

This meeting was called to order at 1:00 pm.

- 06142018-01 Action item Approval (with possible modifications) of the minutes of the meeting set forth below:
 - Regular meeting of May 10, 2018Staff recommendation: Approve minutes.
Documents provided to Board prior to meeting:
Draft minutes.

- Commissioner Breslin moved to approve the regular meeting minutes of May 10, 2018.
- Commissioner Lim seconded the motion.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve the regular meeting minutes of May 10, 2018.

Motion passed 4-0

- 06142018-10 Re-Ordered Discussion item

President's Report (President Scott)

Documents provided to Board prior to meeting: None.

- President Scott re-ordered the agenda to recognize Laini Scott's retirement from the Health Service System as Health Service Board Secretary.

Public comments: None

- 06142018-02 Discussion item

General public comment on matters within the Board's jurisdiction not appearing on today's agenda

Public comments: None.

RATES AND BENEFITS

- 06142018-03 Action item

Approve City Plan's rates and premium contributions for actives and early retirees for 2019 plan year (Aon)

Staff recommendation: Approve 2019 rates and premium contributions; suspend stabilization policy; and apply the entire rate stabilization balance of \$1,661,000 to 2019 rates.

Documents provided to Board prior to meeting: Aon report.

- Mike Clarke, Aon actuary, presented the following recommendation for an additional action to the 2019 UHC City Plan Rate Card:
 - Approval of a one-time basis suspension of the stabilization reserve policy to spend the full balance of the Dec. 31, 2017 City Plan rate stabilization reserve of

- \$1,661,000 in 2019 City Plan & City Plan - Choice Not Available plan rating.
 - Approval of a rate card scenario, presented as Scenario 2, for 2019 plan year City Plan & City Plan – Choice Not Available where the full \$1,661,000 rate stabilization reserve amount is used in the 2019 rating.
- Mr. Clarke recommended this additional action for the following reason:
 - Mitigate potential migration of healthier members out of City Plan due to increased contributions from 2018 to 2019
 - Dampen adverse selection and resulting negative claim experience that may occur if healthy City Plan members depart to other plans.
- For comparison, Mr. Clarke’s presentation included the scenario, presented as Scenario 1, of applying one-third (\$554,000) of the Dec. 31, 2017 City Plan rate stabilization balance of \$1,661,000 to the 2019 City Plan rate cards.
- Commissioner Sass moved to approve the suspension of the self-funded stabilization reserve policy on a one-time basis and spend the full balance of the Dec. 31, 2017 City Plan rate stabilization reserve (\$1,661,000) in 2019 City Plan and City Plan – Choice Not Available plan rating and approve Scenario 2 rate cards for the 2019 plan year.
- President Scott seconded the motion.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve City Plan’s rates and premium contributions for actives and early retirees for the 2019 plan year as recommended.*

Motion passed 4-1.

Commissioner Breslin dissented.

□ 06142018-04 Action item

Approve retiree dental rates and premium contributions for 2019 plan year (Aon)

Staff recommendation: Approve 2019 retiree dental rates and premium contributions.

Documents provided to Board prior to meeting:
Aon report.

- Tom Ricks, Aon actuary, presented the following recommendation for the 2019 Delta Dental retiree PPO plan rates:
 - Approval of the 2019 Delta Dental retiree PPO insured plan rates with no change in rates from the 2018 premiums and the addition of Delta Dental's SmileWay program benefits to the retiree PPO plan.
- Vice President Lim acknowledged Delta Dental for keeping the rates down and for taking out the premium contribution increase for the SmileWay program.
- Vice President Lim moved to approve the 2019 retiree dental rates and premium contributions.
- Commissioner Breslin seconded the motion.
- Sharon Stanek-Lowe, Delta Dental Account Manager, thanked the Health Service Board and expressed that Delta Dental felt this was a great benefit for the retirees.
- President Scott asked if Ms. Stanek-Lowe would plan to follow up on research about the effectiveness of these programs and how they impact this population. To which, Ms. Stanek agreed.
- President Scott asked Executive Director Yant to work with Ms. Stanek-Lowe on this research and to keep the Health Service Board updated regularly.

Public comments: Claire Zvanski, RECCSF representative, thanked Delta Dental, President Scott and Vice President Lim for their comments. Ms. Zvanski stated that she heard from a number of members that they hoped the SmileWay benefit would be included and she believes that they will be excited that it will be included at no additional cost. Ms. Zvanski stated that she was happy that they would be tracking the benefit use. Ms. Zvanski also acknowledged Delta Dental for partnering with RECCSF and supporting this benefit.

Dennis Kruger, representative for the active and retired firefighters and spouses, thought that the benefit is wonderful, but questioned if a member,

who qualifies for SmileWay, would be eligible for the additional benefits under the program if they exhausted their normal cleaning benefit.

Ms. Stanek-Lowe answered that, yes, the additional cleanings and other benefits under SmileWay would apply if a member self-elects at that point in time with one of the 5 diseases under the SmileWay program.

Action: Motion was moved and seconded by the Board to approve retiree dental rates and premium contributions for 2019 plan year as recommended.

Motion passed 5-0.

□ 06142018-05 Action item

Review and approve UHC's Medicare Advantage fully-insured retiree rates and premium contributions for 2019 plan year (Aon)

Staff recommendation: Approve 2019 rates and premium contributions.

Documents provided to Board prior to meeting:
Aon report.

- Mike Clarke & Won Andersen, Aon actuaries, presented the following recommendations for the 2019 plan year UHC Medicare Advantage fully-insured retiree rates and premium contributions:
 - Approval of the following new programs to support members. This will include post-hospital discharge meal delivery, care-related transportation services, and enhanced nutrition counseling.
 - Approval of standardized purchasing initiatives that reduce premiums and lower copayments for many members: UHC's preferred diabetic supplies program and Group Select prescription drug formulary.
- Ms. Andersen went into detail about the plan design changes and its impact on 495 members currently using diabetic supplies that would become non-preferred at the end of January 2019. These members can receive a one-time transition supply for the first 90 days in addition to an opportunity for

the member & physician to request a certain amount of the non-preferred product. The member can appeal due to extenuating circumstances where they need to stay on the non-preferred product.

- Ms. Andersen stated that the goal is to communicate these changes to the members in the fourth quarter of 2018. Ms. Andersen will come back with a refined communication implementation plan after President Scott asked through Director Yant that some thought is given to a targeted pre-notification around this design change.
- Ms. Andersen then detailed the proposed formulary change, noting that the proposed formulary covers all of the Medicare Part D eligible drugs in brand and generic form, except certain high-risk medications. These high-risk medications are on the formulary but would require the member to obtain prior authorization.
- Commissioner Ferrigno asked if there is a change from today's program for the high risk.
- Ms. Andersen stated that 1,746 members would be adversely impacted by the proposed formulary change and that this number includes the members using high-risk medications.
- President Scott asked Ms. Andersen to clarify high risk drugs.
- Ms. Andersen stated that CMS has a list of medications that are high risk to members over 65 and that they want the pharmacist to review those prescriptions with the doctors.
- Mr. Clarke detailed the rate cards which reflected the full employer contributions that are presently available to retired employees hired on or before January 9, 2009, disability retirees and surviving spouse or surviving domestic partners of active employees who died in the line of duty. Mr. Clarke showed how the rate cards displayed rate increases

as “status quo” and rates “with all the changes.”

- Commissioner Breslin inquired about a rate cap and the difference between the current and proposed nutritional counseling.
- Shannon Hass, United Healthcare, stated that there was a rate cap for 2018, which will end on Dec. 31 and that nutritional counseling in the past was tied to diseases, but the proposed nutritional counseling would not be tied to any disease.
- Commissioner Sass questioned why the supply chain benefit was not proposed by itself instead of coupling it with other benefits that offset the gains by changing the formulary. Commissioner Sass also questioned if the small difference in monthly premium by the proposal was worth subjecting a portion of the membership through changes in their medications.
- Mr. Clarke emphasized the benefit that the enhanced nutritional counseling and transportation services would bring to the membership and rationalized that the formulary change will benefit many more members than the number who would be adversely impacted.
- Commissioner Lim moved to approve UHC’s Medicare Advantage fully-insured retiree rates and premium contributions for the 2019 plan year.
- Commissioner Breslin seconded the motion.

Public comments: Herbert Weiner, retiree, asked about coverage for retirees.

President Scott requested that if the public has specific questions about their coverage, to direct the questions to the Health Service System staff.

Dennis Kruger, representative for the active and retired firefighters and spouses, requested explanation on how split-families (Medicare retirees with non-Medicare dependents in separate plans) are accounted for in the Aon documentation.

Mr. Clarke stated that split-families are not illustrated in the graphs but are accounted for in the Aon documentation.

Director Yant stated that she is pleased to see these evidence-based practices for reducing hospital admission.

Maureen O'Shay, retiree, asked about skilled nursing facilities

Director Yant responded that the Department of Public Health currently has a project looking into the shortage of skilled nursing facilities.

Ms. O'Shay asked about a specific service.

President Scott requested that if the public had a specific benefit related question to see a member of the staff so that it could be followed up accordingly.

Claire Zvanski, RECCSF representative, stated that the rate card on page 35 of the Aon documentation seemed reasonable. Ms. Zvanski noted that transportation services is a significant issue with retirees and was impressed with the nutritional benefit as it tends to be an increased cost. Ms. Zvanski suggested that the Health Service Board give serious consideration to approving the proposed action.

Action: Motion was moved and seconded by the Board to approve UHC's Medicare Advantage fully-insured retiree rates and premium contributions for the 2019 plan year.

Motion passed 5-0.

□ 06142018-06 Action item

Review and approve Kaiser Permanente's Medicare Advantage fully-insured retiree rates and premium contributions for 2019 plan year (Aon)

Staff recommendation: Approve 2019 rates and premium contributions.

Documents provided to Board prior to meeting: Aon report.

- Mike Clarke, Aon actuary, presented documentation showing the large membership in this plan and a 13.2% reduction in premiums from 2018 to 2019. Mr. Clarke stated that the reason behind the

reduction is a combination of adjustments in CMS contributions from the federal government as well as favorable underwriting.

- President Scott asked for the definition of “favorable underwriting.”
- Mr. Clarke clarified that this means a 2% increase only, which is well below national average. More information about the decrease was presented on page 10 of the documentation.
- President Scott asked for Mr. Clarke’s recommendation.
- Mr. Clarke recommended that the Board approve the Kaiser Permanente Medicare Retiree rates.
- Commissioner Sass moved to accept the Kaiser Permanente Medicare Advantage fully-insured retiree rates and premium contributions for plan year 2019.
- Vice President Lim seconded the motion.

Public comments: Diane Ulrich, UESF Retired Division, asked that the Board consider adding the benefits discussed in Action Item 6, such as meal delivery and transportation services for seniors.

Action: Motion was moved and seconded by the Board to approve Kaiser Permanente’s Medicare Advantage fully-insured retiree rates and premium contributions for the 2019 plan year.

Motion passed 5-0.

□ 06142018-07 Action item

Review and approve Kaiser Permanente’s Multi-state Region (outside CA, located in Northwest (primarily Oregon), Washington state, and Hawaii) fully-insured retiree rates and premium contributions for 2019 plan year (Aon)

Staff recommendation: Approve 2019 rates and premium contributions.

Documents provided to Board prior to meeting: Aon report.

- Mike Clarke, Aon actuary, presented documentation presented the retiree rates for the Kaiser Washington, Northwest and Hawaii

plans. The rates that were presented were for Medicare retirees and early retirees.

- Mr. Clarke recommended that the Board approve the Kaiser rates and premium contributions for the Multi-State Region fully-insured retiree rates and premium contributions for the 2019 plan year.
- President Scott asked if the Northern California region controls the rate setting process in these other Kaiser regions.
- Mr. Clarke confirmed that it does not.
- President Scott asked if the regions are independent of each other.
- Mr. Clarke confirmed that they are, but Kaiser Northern California works with the individual regions for rate creation.
- Commissioner Breslin moved to approve the Kaiser Multi-State Regional rate cards.
- Commissioner Sass seconded the motion.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve Kaiser Permanente's Multi-State Region (outside CA, located in Northwest (primarily Oregon), Washington state, and Hawaii) fully-insured retiree rates and premium contributions for 2019 plan year.

Motion passed 5-0.

□ 06142018-08 Action item

Approve Life and Disability renewal for 2019 plan year (Aon)

Staff recommendation: Approve 2019 renewal.

Documents provided to Board prior to meeting: Aon report.

- Anne Thompson, Aon actuary, presented documentation for the Life and Disability renewal for plan year 2019. Ms. Thompson's recommendation was to approve the continuation of the current programs and premiums as there was a 3-year rate guarantee in 2017 that would extend until the end of 2019.
- Ms. Thompson noted that in late 2017, The Hartford Life and Accident Insurance

Company acquired Aetna Group Insurance, Group Life and Disability. Going forward, Aon will no longer refer to Aetna as the company is now the Hartford.

- Commissioner Sass moved to approve the Life and Disability renewal for the 2019 plan year.
- Commissioner Breslin seconded the motion.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve Life and Disability renewal for 2019 plan year.

Motion passed 5-0.

□ 06142018-09 Discussion item

Prop B Retirees: Medical Subsidy 2019 (Aon)

Documents provided to Board prior to meeting:
Aon report.

- Mike Clarke, Aon actuary, presented documentation to remind the Board of the charter contributions available through section A8.428B and that the upcoming year will see a population of retirees who retire with 50% of full contribution subsidy.
- President Scott asked if there is a formula that will be coming out or will it be applied to the rates for this segment of retirees.
- Mr. Clarke showed illustrations of the rates and contributions for this segment of retirees, in addition to retirees who were hired on or before Jan. 9, 2009.
- Vice President Lim asked if the illustrations were tied to any plan or just estimates.
- Mr. Clarke stated that these calculations will be applied to each retiree plan, but the numbers that were displayed only showed “easy math.”
- Vice President Lim asked if a separate column would be prepared for this retiree group for the 2020 plan year.

- Mr. Clarke confirmed that going forward the retiree rate exhibits would include the 50% retiree group.
- Commissioner Sass noted that the Board will be looking at a very different rate structure in the future as the retiree group grows and ages into the tiered contribution structure by charter direction.
- Vice President Lim stated that when Proposition B was passed that there is a healthcare trust fund that was set up to minimize contributions. Vice President Lim opined that the Board might have to coordinate or have discussions with the commissioned health service trust fund board that handles those monies to help the employees and employer.

Public comments: None.

□ Meeting Break

Recess from 2:55 to 3:00 PM

REGULAR BOARD MEETING MATTERS

□ 06142018-10 Discussion item President's Report (President Scott)

Documents provided to Board prior to meeting:
None.

- President Scott addressed an unsigned letter that was sent to the Board discussing wellness. President Scott encouraged that, in the future, if an individual has a concern around any program or benefit, that they declare who they are so the Board can be responsive. President Scott also addressed the retirement of the previous Executive Director and clarified that Aon is the Board's actuary.

Public comments: Claire Zvanski, RECCSF representative, acknowledged that RECCSF was in receipt of this anonymous letter and appreciated President Scott's words.

Ms. Zvanski also acknowledged and thanked Laini Scott, Health Service Board Secretary, for her hard work.

Ms. Zvanski also acknowledged HSS EAP in light of the passing of a City employee.

□ 06142018-11 Action item

Election of Health Service Board Officers (President and Vice President) for fiscal year 2018-2019
(President Scott)

Documents provided to Board prior to meeting:
None.

- President Scott deferred to the Chair of the Governance Committee, Commissioner Breslin.
- Commissioner Breslin asked for nominations for President of the Health Service Board.
- Vice President Lim nominated Commissioner Karen Breslin as President of the Health Service Board for the 2018-2019 fiscal year.
- President Scott seconded the motion.
- Commissioner Breslin asked for nominations for the position of Health Service Board Vice President.
- President Scott nominated Commissioner Stephen Follansbee, M.D.
- Vice President Lim seconded the motion.

Public comments: President Scott thanked Commissioner Breslin for taking on the task of being the Health Service Board president.

President Scott stated that he had the distinct privilege serving as Board President for over 3+ years and thoroughly enjoyed his period of service. He noted that his ascent was quick, and this was a transition period with changes in Executive Director, benefit partners and plan designs. President Scott thanked the Commissioners, acknowledged the hard work of the staff and will be looking forward to future meetings as a Commissioner.

Commissioner Sass announced that he has decided not to accept a second term on the Board. Commissioner Sass detailed how he was elected to the Board and the many events that occurred over

his service. Commissioner Sass expressed that he can continue to be of value to the Board as a private citizen and will be available to help when needed.

President Scott thanked Commissioner Sass for his service.

Vice President Lim thanked President Scott for his service as President.

Commissioner Breslin thanked President Scott for staying on as President through the transitions.

Action: Motion was moved and seconded by the Board to elect Commissioner Karen Breslin as Health Service Board President and Commissioner Stephen Follansbee, M.D. as Health Service Board Vice President for the 2018-2019 fiscal year.

Motion passed 5-0.

□ 06142018-12 Discussion item [Executive Director's Report](#) (Executive Director Yant)

- HSS Personnel
- Operations, Enterprise Systems & Analytics, Finance/Contracting, Communications, Well-Being/EAP
- Meetings with Key Departments
- Other additional updates

Documents provided to Board prior to meeting:

1. Executive Director's report;
 2. Reports from Operations, Enterprise Systems & Analytics, Communications, Well-Being and Employee Assistance Program;
 3. DEVA update.
- Executive Director Yant reported on the outreach to the retiree community to understand their wellbeing needs with over 1,500 survey responses received.
 - Executive Director Yant reported on the Dependent Eligibility Verification Audit and stated that HSS is working closely with the contractor to address member concerns.

Public comments: Claire Zvanski, RECCSF, acknowledged Susann Rodriguez-Corns for her retirement and service at HSS.

- 06142018-13 Discussion item **HSS Financial Reporting as of March 31, 2018**
(Pamela Levin)

Documents provided to Board prior to meeting:
Financial update memo;

- Pamela Levin, CFO HSS, presented the Financial update memo that summarizes the actual revenues and expenses of the employee benefits trust fund and general fund administration through March 31st, with projections to the end of the fiscal year.
- The fund balance is projected to be \$20.5 million based on activity through March 2018, which is a decrease of 3%.
- UHC claims experience has improved and projected use of the fund balance is less than the amount that was used to stabilize rates.
- Blue Shield Access+ rates are set and would replenish stabilization reserve at \$10 million.
- Blue Shield Trio had unfavorable claims experience over past 3 months and the projection is to use \$1.3 million of fund balance.
- The dental plans continue to see favorable claims experience with a projected savings in the \$3 budget.
- Forfeiture calculations are being worked on this month, which will be finalized in June.
- They are working to carry forward \$150,000 that was budgeted for an online premium payment project.
- President Scott asked about the auditing process.
- Ms. Levin stated that meetings with auditors have begun with field visits in August and September. The audit is expected to be issued in October.

- Ms. Levin has been working with a budget analyst received the analyst's recommendations. She does not think that there will be any concerns with the budget.
- President Scott thanked Ms. Levin and her team for their hard work.

Public comments: None.

- 06142018-14 Action item [Vote on whether to cancel July 2018 Health Service Board meeting](#) (Executive Director Yant)

Documents provided to Board prior to meeting:
None.

- Commissioner Breslin moved to cancel the July 2018 Health Service Board meeting.
- Vice President Lim seconded the motion.

Public comments: None.

Action: Motion was moved and seconded by the Board to Cancel the July 2018 meeting.

Motion passed 5-0.

- 06142018-15 Discussion item [Report on network and health plan issues \(if any\)](#) (Respective plan representatives)

- Denise Rodriguez, Kaiser Permanente, presented Kaiser Permanente's transition of care program. Ms. Rodriguez noted that Kaiser includes a social worker element in their program where the worker will meet with the member and their family to connect them to community resources for information. Kaiser is piloting a transportation program in two of their regions. Kaiser also has discount programs for meals, medical monitoring and transportation.
- Commissioner Breslin asked if Kaiser has nutritional counseling.
- Ms. Rodriguez stated that this is standard in Kaiser's program.

Public comments: None.

- 06142018-16 Discussion item [Opportunity to place items on future agendas](#)

Public comments: Dennis Kruger, representative for active and retired firefighters and spouses, thanked President Scott for his years of leadership and Commissioner Sass for all his efforts on the Health Service Board.

Mr. Kruger also thanked Laini Scott for her work as Board Secretary.

Mr. Kruger addressed the stabilization fund and raised the possibility of the Board to raise the fund from \$3/month to \$5/month so that in future years there would be monies to continue on with their current work.

Claire Zvanski, RECCSF, thanked Commissioner Sass and President Scott for their efforts and work on the Health Service Board. Ms. Zvanski congratulated Commissioner Follansbee, M.D. on his election and thanked Vice President Lim for his service.

Herbert Weiner thanked Commissioner Sass and President Scott for their work on the Board. Mr. Weiner also congratulated the newly elected positions on the Board.

Won Andersen, Aon actuary, expressed thanks on behalf of Aon to the Board, HSS leadership and the evaluation committee for the opportunity to continue the partnership. Ms. Andersen also thanked Executive Director Yant, Pamela Levin, & Michael Visconti for their professionalism throughout the Request for Proposal process. Ms. Andersen also thanked President Scott, Commissioner Sass, congratulated Laini Scott and said Aon is looking forward to working with Commissioner Breslin.

- 06142018-17 Discussion item [Opportunity for the public to comment on any matters within the Board's jurisdiction](#)

Public comments: None.

- 06142018-18 Action item [Vote on whether to hold closed session for member appeal](#) (President Scott)

Staff recommendation: Hold closed session.

 - Commissioner Breslin moved to hold a closed session to hear a member appeal.

- Vice President Lim seconded the motion.

Public comment: None.

Action: Motion was moved and seconded by the Board to hold a closed session to hear a member appeal.

Motion passed 5-0.

Closed session pursuant to: California Constitution Article I, Section 1; the Confidentiality of Medical Information Act, California Civil Code §§56 et seq; and the Health Insurance Portability and Accountability Act, 42 U.S.C. §§1320d et seq.

- 06142018-19 Action Item Member appeal (President Scott)
Documents provided to Board prior to meeting:
 1. HSS documentation;
 2. Member documentation.Staff recommendation: Uphold HSS decision.

Reconvene in Open Session

- 06142018-20 Action item Vote to elect whether to disclose any or all discussion held in Closed Session (San Francisco Administrative Code Section 67.12) (President Scott)
 - Commissioner Breslin moved to not disclose any of the discussion held in closed session.
 - Vice President Lim seconded the motion.Public Comments: None.
Action: Motion was moved and seconded by the Board to not disclose any of the discussion held in closed session.
Motion passed 5-0.
- 06142018-21 Action item Possible report on action taken in closed session (Government Code Section 54957.1(a)(5) and San Francisco Administrative Code Section 67.12) (President Scott)

- Vice President Lim moved to not report on action taken in closed session.
- Commissioner Ferrigno seconded the motion.

Public Comments: None.

Action: Motion was moved and seconded by the Board to not report on action taken in closed session.

Motion passed 5-0.

□ Adjourn: 4:20pm

Summary of Health Service Board Rules Regarding Public Comment

- Speakers are urged to fill out a speaker card in advance, but may remain anonymous if so desired.
- A member of the public has up to three (3) minutes to make pertinent public comments before action is taken on any agenda item.
- A member may comment on any matter within the Board's jurisdiction as designated on the agenda.

Health Service Board and Health Service System Web Site: <http://www.myhss.org>

Disability Access

Regular Health Service Board meetings are held at City Hall, 1 Dr. Carlton B. Goodlett Place, in Hearing Room 416 at 1:00 PM on the second Thursday of each month. The closest accessible BART Station is Civic Center, three blocks from City Hall. Accessible MUNI lines serving this location are: #42 Downtown Loop, and the #71 Haight/Noriega and the F Line to Market and Van Ness and the Metro stations at Van Ness and Market and at Civic Center. For more information about MUNI accessible services, call (415) 923-6142. There is accessible parking in the vicinity of City Hall at Civic Center Plaza adjacent to Davies Hall and the War Memorial Complex.

Accessible seating for persons with disabilities (including those using wheelchairs) will be available.

In order to assist the City's effort to accommodate persons with severe allergies, environmental illnesses, multiple chemical sensitivity or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to various chemical-based products. Please help the City accommodate these individuals.

Knowing Your Rights Under the Sunshine Ordinance

Government's duty is to serve the public, reaching its decision in full view of the public. Commissions, boards, councils and other agencies of the City and County of San Francisco exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For more information on your rights under the Sunshine Ordinance or to report a violation of the ordinance, visit the Sunshine Ordinance Task Force website at <http://www.sfgov.org/sunshine>.

Lobbyist Registration and Reporting Requirements

Individuals and entities influencing or attempting to influence local legislative or administrative action may be required by the San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code § 2.100] to register and report lobbying activity. For more information about the Lobbyist Ordinance, please contact the San Francisco Ethics Commission at 25 Van Ness Avenue, Suite 220, San Francisco, CA 94102; telephone (415) 252-3100; fax (415) 252-3112; web site www.sfgov.org/ethics.

Summary of Health Service Board Rules Regarding Cell Phones and Pagers

- The ringing and use of cell phones, pagers and similar sound-producing electronic devices are prohibited at Health Service Board and committee meetings.
- The Chair of the meeting may order the removal of any person(s) in violation of this rule from the meeting room.
- The Chair of the meeting may allow an expelled person to return to the meeting following an agreement to comply with this rule.

The complete rules are set forth in Chapter 67A of the San Francisco Administrative Code.

If any materials related to an item on this agenda have been distributed to the Health Service Board after distribution of the agenda packet, those materials are available for public inspection at the Health Service System during normal office hours. For more information, please contact Anthony Gan at (415) 554-0607 or email at anthony.gan@sfgov.org.

The following email has been established to contact all members of the Health Service Board:
health.service.board@sfgov.org.

Health Service Board telephone number: (415) 554-0607