



City & County of San Francisco

# HEALTH SERVICE BOARD

1145 Market Street + Suite 200 + San Francisco, CA 94103

## Minutes

### *Regular Meeting Combined with Rates and Benefits Committee*

Thursday, February 13, 2014

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 Karen Breslin  
Vice President Wilfredo Lim  
Supervisor Mark Farrell, arrived 1:50 p.m.  
Commissioner Sharon Ferrigno  
Commissioner Jean S. Fraser, excused  
Commissioner Randy Scott  
Commissioner Jordan Shlain, M.D., arrived 1:32 p.m.

This Health Service Board meeting was broadcast live on SFGovTV. Replay of the regular meetings are available the following day on the [sfgov.org](http://sfgov.org) website. The videotaped meeting link and all meeting materials are posted on the [myhss.org](http://myhss.org) website.

This meeting was called to order at 1:08 p.m.

Following roll call and prior to the first agenda item, President Breslin commended Commissioner Ferrigno on her promotion to the position of Commander of the San Francisco Police Department.

02132014-01

Action item

Approval (with possible modifications) of the minutes of the meeting set forth below:

- Regular meeting of January 9, 2014

Staff recommendation: Approve minutes.

Documents provided to Board prior to meeting:  
Draft minutes.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve the regular meeting minutes of January 9, 2014.

Motion passed 4-0.

## RATES AND BENEFITS COMMITTEE

- 02132014-02    Action item    Initiation of black-out period for all HSS vendors for the duration of the rates and benefits process (President Breslin)  
  
Staff recommendation: Approve black-out period during rates and benefits process.  
  
Documents provided to Board prior to meeting: Service Provider Selection Policy contained in Health Service Board Governance Policies (Black-Out Periods, paragraphs 9-16).
  - President Breslin announced the initiation of a black-out period during the rates and benefits process, which prohibits Board Members from communicating with service providers on matters pertaining to HSS except during Board or committee meetings.  
Public comments: None.  
  
Action: Motion was moved and seconded by the Board to approve the initiation of a black-out period for all HSS vendors for the duration of the rates and benefits process.  
  
Motion passed 4-0.
  
- 02132014-03    Action item    Approve City Plan's administrative fees and Employer Group Waiver Plan (EGWP) premium for 2015 plan year (Committee Chair Scott)  
  
Staff recommendation: Approve the 2015 City Plan administrative fee and EGWP premium.  
  
Documents provided to Board prior to meeting: Report prepared by Aon Hewitt, "City Plan (UHC) Administrative Fees Presentation."

- Commissioner Scott made a few initial comments regarding this year's rates and benefits process. He stated that while he is a new Member of the Health Service Board, he has extensive background and experience on the subject. He acknowledged the skill, experience and dedication of his predecessor, former Commissioner Claire Zvanski, stating that he will use her example as his touchstone for the work ahead. He stated that the full interest of the HSS members is the Board's highest priority, although not its only priority. He encouraged the participation of all stakeholders in the rates and benefits process to understand the outcome and how it was achieved.
- Anil Kochhar, Aon Hewitt actuary, presented a proposed 4% increase to City Plan's (UHC) 2014 administrative fees for the 2015 plan year.
- The proposed 4% increase for actives and early retirees is as follows:
  - 2014: \$38.02
  - 2015: \$39.54
- The proposed 4% increase for Medicare retirees is as follows:
  - 2014: \$23.36
  - 2015: \$24.17
- Aon Hewitt initially projected a double-digit increase of approximately 15-20% in UHC's Employer Group Waiver Plan ("EGWP") premium for the Medicare retirees' drug portion of the City Plan.
- To ensure that the Medicare portion of City Plan is sustainable, UHC has proposed a 7% increase from \$146.69 to \$156.96 PMPM for City Plan's EGWP premium for the 2015 plan year for Medicare Part D retirees.
- Aon Hewitt recommends approval of the proposed administrative fees and EGWP premium for the 2015 plan year.

Public comments: None.

Action: Motion was moved and seconded by the Board to accept the recommendations as presented.

Motion passed 4-0.

- 02132014-04 Discussion item [Review City Plan's claims experience and preliminary 2015 rates](#) (Committee Chair Scott)

Documents provided to Board prior to meeting:  
Report prepared by Aon Hewitt, "City Plan (UHC) Utilization and Claims Experience Presentation."

- Anil Kochhar noted that the claims stabilization reserve presentation in agenda item 8 also relates to this item; therefore, cross-references may be made between the two matters.
- As an aside, Mr. Kochhar stated that in his 30 years' experience as an actuary, he has never seen a plan correct as well as the City Plan.
- Aon Hewitt's claims presentation outlined the average contract size, monthly premium amounts, incurred and paid claims as well as incurred loss ratio for actives, early retirees and Medicare members.
- City Plan's claims experience through December 2013 was good and will allow for premium equivalent decreases.
- Page 10 of Aon Hewitt's report outlines the recommended preliminary renewal increases for City Plan for 2015, which is -16% for actives and early retirees and -20% for retirees.
- Aon Hewitt will allocate the calculated stabilization amount of \$7,431,000 to all City Plan rates.
- See Page 1 of the "City Plan (UHC) Rate Stabilization Presentation" under agenda item 8 for the 2015 rate stabilization calculation and remaining carry forward in stabilization reserve for plan year 2016 (\$14,861,000).
- Mr. Kochhar noted that the HSS 2014 rates subsidy for members who agreed to the 93/93/83 contribution split will not continue in the 2015 plan year.

- See the Appendix of Aon Hewitt’s report for the preliminary 2015 rate cards for the status quo, 90/10 employee MOUs and 93/83/83 MOUs.
- Final rate cards for 2015 will be presented at the June 12, 2014 Health Service Board meeting.
- Commissioner Shlain arrived during this agenda item.

Public comments: None.

□ 02132014-05 Action item

[Review Delta Dental Retiree plan design options and approve retiree survey project plan](#) (Committee Chair Scott)

Staff recommendation: Approve retiree survey of project plan on dental benefit design options.

Documents provided to Board prior to meeting: Report prepared by Aon Hewitt, “Retiree Dental Review of Plan Design and Cost Alternatives.”

- Anil Kochhar reviewed the current retiree PPO dental plan. He also presented three retiree dental plan design alternatives to address member concerns regarding the value of the benefit, in response to the Board’s request on December 12, 2013.
- Alternative 1 adds a Diagnostic and Prevention (“D&P”) waiver allowing continued coverage for preventive services after the annual maximum is reached.
- Alternatives 2 and 3 change to a Three Tier Network (similar to the plan design for active members) where the cost share is reduced for the 5% of members who see Non-Participating dentists.
- Delta Dental discovered an error in its quoted monthly premium rate for Alternative 1, indicating a 7.29% premium increase in existing rates instead of 11.76%. However, it will honor the 7.29% premium increase for one year only. Thereafter the monthly premium rate will increase by 11.76% over current rates.

- Diagnostic and Preventive services cover the following:
  - Diagnostic: oral examinations; x-rays; diagnostic casts; examination of biopsied tissue; palliative (emergency) treatment of dental pain; and special consultation.
  - Preventive: prophylaxis (cleaning); fluoride treatment; and space maintainers.
- Adding D&P services typically costs between \$250 and \$300 annually. Adding the D&P maximum waiver will result in a premium cost increase. However, D&P services would allow members to use the \$1,000 benefit for all other services. See pages 5 of Aon Hewitt's report.
- See pages 6-8 for Alternatives 1, 2 and 3.
- Aon Hewitt recommends either Alternative 1 or Alternative 3.
- Alternative 1 would increase premium costs and allow all D&P services to continue to be covered after the annual maximum premium is reached. The 7.29% premium increase would raise rates \$3.50 per member per month ("PMPM") for the first year. Aon Hewitt recommends surveying members on the actual rate increase of 11.76% or \$5.00 PMPM.
- Alternative 3 enhances the annual maximum benefit for members utilizing PPO and Premier dentists. This plan design incentivizes in-network utilization and enhances benefits for members who use Premier dentists. With a higher annual maximum, the D&P waiver will not be required for most members.
- President Breslin stated that she was not in favor of Alternative 3, which steers members to the PPO.
- Lisa Ghotbi, HSS Acting Director, reported that at the Board's direction, HSS prepared a sample survey for retiree feedback on the proposed dental benefit. The cost of the monthly premium in survey question #1

would be increased from \$3.50 to \$5.00. This survey will be sent to all retirees within the next few weeks. HSS will provide recommendations to the Board based on member feedback.

- Committee Chair Scott recommended attaching a cover letter to the survey explaining the options and the difference between each category.
- Commissioner Ferrigno departed the meeting during this agenda item.
- Supervisor Farrell arrived during this agenda item.

Public comments: Claire Zvanski, retiree and former Health Service Board Member, spoke in support of surveying all retirees, since some members might be able to return to the System. She also suggested defining the three alternatives so that members can identify the category associated with their dentist, and that the focus should be placed on prevention.

Herbert Weiner, retired City employee, read aloud and submitted the following e-mail from his dentist as documentation of the need for more than two teeth cleanings per year: "To Whom It May Concern, it is important for Herbert Weiner to have three teeth cleanings a year due to periodontal problems and medication that the patient takes. Herbert had to have two teeth removed due to decay. Patient has generalized moderate bone loss and three cleanings a year are recommended for him. Rebecca H. Yan, DDS."

Mr. Weiner asked that his dentist's e-mail be submitted for the record and that he is citing his case as an example to advocate for at least three cleanings per year.

Dennis Kruger, retired and active firefighter representative, stated that Alternative 3 gives the most value for the money paid, although it does not account for the D&P. He suggested factoring in a tiered system giving members a choice of dental benefits.

Richard Rothman, retired City employee, suggested that Delta Dental and the Board consider including teeth cleanings and x-rays as preventive measures and include those services in the rates. He agreed with providing a survey to retired members and

including a question or two about the reason members are not in the System, if applicable.

Ms. Ghotbi made reference to page 26 of Aon Hewitt's report ("Retiree Dental PPO: Claims Experience Analysis"), stating that the loss ratio for the retiree dental plan is at 99% with \$.99 on every dollar going toward caring for members' teeth. No profit is being made by Delta Dental. One cent is being used to pay Delta Dental for administering the benefit. For that reason, teeth cleanings cannot be covered. The only way to lower the premium is to have more members in the plan.

Action: Motion was moved and seconded by the Board to approve the retiree survey on dental benefit design options.

Motion passed 5-0.

□ 02132014-06 Action item

[Review fund status for the Incurred But Not Reported \(IBNR\) reserves and approve updates to IBNR Reserve Policy \(Committee Chair Scott\)](#)

Staff recommendation: Approve policy updates.

Documents provided to Board prior to meeting: Report prepared by Aon Hewitt, "IBNR Reserve Fund Status Presentation."

- Anil Kochhar reported that current policy requires an Incurred But Not Reported ("IBNR") reserve for each plan that is self-funded/flex-funded (City Plan and Blue Shield). He reviewed the status of the IBNR reserve for each of the self-funded/flex-funded plans.
- The recommended IBNR Reserve for the City Plan as of June 30, 2013 is \$7,458,869, which includes the IBNR Reserve for the active self-funded Delta Dental PPO plan.
- The recommended IBNR Reserve for the flex-funded Blue Shield plan as of June 30, 2013 is \$18,371,368.
- The above estimates will be reset as of June 30, 2014 after the end of the fiscal year.
- Mr. Kochhar also reviewed the updated IBNR reserve policy, which added self-funded HMO plans and amended the date in Policy History.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve the updated Incurred But Not Reported (“IBNR”) reserve policy as presented.

Motion passed 5-0.

□ 02132014-07 Action item

Review fund status for contingency reserves and approve Contingency Reserve Policy (Committee Chair Scott)

Staff recommendation: Approve policy updates.

Documents provided to Board prior to meeting: Report prepared by Aon Hewitt, “Contingency Reserve Fund Status Presentation.”

- Mr. Kochhar reported that a Contingency Reserve protects against shortfalls in funding estimates. Current policy requires a Contingency Reserve for each self-funded plan.
- The recommended Contingency Reserve for the City Plan as of June 30, 2013 is \$10,483,994, which includes the Contingency Reserve for the active self-funded Delta Dental PPO plan.
- The recommended Contingency Reserve for the Blue Shield flex-funded plan as of June 30, 2013 is \$13,180,169.
- The City Plan and Blue Shield Contingency Reserves are fully-funded.
- The above estimates will be reset as of June 30, 2014 after the end of the fiscal year.
- Mr. Kochhar also reviewed the updated Contingency Reserve policy, which added self-funded HMO plans and amended the date in Policy History.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve the updated contingency reserve policy as presented.

Motion passed 5-0.

□ 02132014-08 Action item

Review fund status for stabilization reserves and approve self-funded plan's Stabilization Reserve Policy (Committee Chair Scott)

Staff recommendation: Approve policy updates.

Documents provided to Board prior to meeting: Report prepared by Aon Hewitt, "City Plan (UHC) Rate Stabilization Presentation."

- The City Plan (UHC) rate stabilization was discussed earlier in agenda item 4.
- Mr. Kochhar stated that when Aon Hewitt initially reviewed flex-funding last year, they were asked about recommending a stabilization reserve for City Plan. At that time, it was suggested to wait until the IBNR and contingency reserve were fully funded. Since there are now ample dollars in the trust fund to fully fund both reserves, there is the potential to start funding a claims stabilization reserve much earlier than previously anticipated.
- Mr. Kochhar noted that no gain or loss was generated by EGWP in the calculation of City Plan's rate stabilization. Language relating to fully-insured premiums has been changed accordingly in the policy.
- As previously reported in agenda item 4, the calculated amount to be applied to 2015 rates is \$7,431,000 per the amortization policy.
- Aon Hewitt recommends amortizing \$7,431,000 across all rating tiers for the City plan according to policy.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve the updated stabilization reserve policy.

Motion passed 5-0.

□ Meeting break

Recess from 2:25p.m. to 2:38 p.m.

- Supervisor Farrell departed the meeting during recess.
- Commissioners Breslin, Lim, Scott and Shlain remained after the break.

## REGULAR BOARD MEETING MATTERS

- 02132014-09 Discussion item [President's Report](#) (President Breslin)
- Documents provided to Board prior to meeting:  
None.
- President Breslin reported that out of concern in maintaining a quorum, this agenda was re-ordered to hear all action items before the discussion items.
  - President Breslin also reported that there will be no Health Service Board election in May 2014 since she and Commissioner Ferrigno were unopposed during the nomination period. They will be recertified as Health Service Board members.
  - Deputy Director, Lisa Ghotbi, was commended for her hard work and leadership during HSS Director Catherine Dodd's absence. President Breslin also commended and thanked HSS staff for their hard work and thinking of members first.
- Public comments: None.
- 02132014-12 Action item [Approval of proposed administrative budget for fiscal year 2014-2015](#) (Pamela Levin)  
(Re-ordered)
- Staff recommendation: Approve proposed budget.
- Documents provided to Board prior to meeting:  
Administrative Budget memo for FY 2014-2015.
- Pamela Levin, HSS Chief Financial Officer, presented the proposed HSS budget for FY 2014-15 and 2015-16. See detailed memo on proposed budget.
- Public comments: Claire Zvanski stated that HSS has traditionally been short-staffed and served far more people than any other City department. She stressed the importance of continuing to lobby hard to get appropriate HSS staffing. She thanked Commissioner Scott for asking that all Health Service Board commissioners get involved because it is necessary, and urged the Board and staff to continue to work with the Mayor's office, the Board of Supervisors and the analysts.

Herbert Weiner stated that he would like to see a robust HSS budget in order to continue to serve members.

Action: Motion was moved and seconded by the Board to adopt the proposed FY 2014-15 and FY2015-16 budget as presented.

Motion passed 40.

- 02132014-13 Action item (Re-ordered)

Initiation of RFP black-out period for FSA/COBRA Administrator (Lisa Ghotbi)

Staff recommendation: Approve black-out period during RFP process.

Documents provided to Board prior to meeting: Notice to Health Service Board.

- Lisa Ghotbi, HSS Acting Director, reported that a black-out notice was being given to the Board regarding a Request for Proposal (“RFP”) scheduled to begin on March 17, 2014 for a COBRA and Flexible Spending Account (“FSA”) vendor. WageWorks, the current vendor, purchased FBMC (previous FSA vendor) approximately two years ago.
- Board members should not communicate with the following vendors on HSS matters outside a Board or Committee meeting for the duration of the RFP process:
  - ADP
  - Benefit Concepts
  - Benesyst
  - COBRA Management Services (CMS)
  - ConnectYourCare
  - Conexis
  - Discovery Benefits
  - EBS
  - Flores & Associates
  - PayFlex
  - TASC
  - WageWorks (incumbent)

Public comments: None.

Action: Motion was moved and seconded by the Board to approve initiation of a black-out period during the FSA/COBRA RFP process.

Motion passed 4-0.

- 02132014-14 Action item (Re-ordered)

Initiation of RFP black-out period for All Payer Claims Database (APCD) (Lisa Ghotbi)

Staff recommendation: Approve black-out period during RFP process.

Documents provided to Board prior to meeting:  
Notice to Health Service Board.

- Lisa Ghotbi reported that a black-out notice was being given to the Board on a Request for Proposal (“RFP”) scheduled to begin in March 2014 for a third-party all payer claims database vendor. This third-party database will allow HSS to analyze and understand the clinical issues faced by members and the factors driving costs, while protecting members’ personal information.
- Board members should not communicate with the following vendors on HSS matters outside a Board or Committee meeting for the duration of the RFP process:
  - Fair Health
  - HCMS
  - HDMS
  - General Dynamics IT
  - Milliman Inc.
  - Navigator, M.D.
  - NunaHealth
  - OnPoint
  - Optum Insight
  - SAS
  - Treo Solutions
  - Truven Health Analytics
  - Verisk Health

Public comments: None.

Action: Motion was moved and seconded by the Board to approve initiation of a black-out period during the all payer claims database RFP process.

Motion passed 4-0.

- 02132014-15 Action item  
(Re-ordered)

Approval of recommended Healthcare Sustainability Budget plan (continued from January 9, 2014) (Lisa Ghotbi)

Staff recommendation: Approve budget plan.

Documents provided to Board prior to meeting:  
HSS summary.

- Lisa Ghotbi reported that prior to 2011, the City Charter authorized the Health Service Board to utilize trust fund reserves to disseminate information to HSS members regarding plan benefits and costs, as well as associated expenses.
- With the passage of Prop C in November 2011, the City Charter expanded the Health Service Board's authority to use trust fund reserves to fund member wellness programs, actuarial expenses and expenses incurred to reduce healthcare costs.
- In April 2012, the Health Service Board approved increasing the \$1.04 per member per month trust fund contribution used for member communications to \$2.05 per member per month, effective January 1, 2013.
- The 2013 expenses against the \$2.05 per member per month include approximately \$800,000 in ongoing expenses such as those related to open enrollment materials and postage, salaries for the Communications Manager and Wellness Coordinator, wellness classes, communications services and related expenditures.
- The available funds attributed to the \$2.05 per member per month expenditures for 2014 total \$2,614,000.
- The 2014 recommendations for use of the \$2.05 per member per month contribution include data analytics (\$500,000), communications (\$500,000) and wellness (\$500,000).
- See Plan for a detailed explanation of expenditures for 2014.

- Once this budget is approved, the Board will be provided with detailed information on an ongoing basis.

Public comments: None.

Action: Motion was moved and seconded by the Board to approve the Healthcare Sustainability Budget plan as presented.

Motion passed 4-0.

- 02132014-19 Action item (Re-ordered)

Vote on whether to hold closed session to discuss member's appeal. (California Constitution Article I, Section 1; the Confidentiality of Medical Information Act, Cal. Civ. Code §§56 et seq; and the Health Insurance Portability and Accountability Act, 42 U.S.C. §§1320d et seq.) (President Breslin)

Staff recommendation: Hold closed session.

- President Breslin inquired into the feasibility of holding a closed session without a quorum.
- Lauren Monson, legal substitute for Deputy City Attorney Erik Rapoport, responded that a closed session may be held without a quorum; however, there were two issues:
  - First, the Board would be unable to make a decision on anything discussed or disclosed in the closed session; and
  - Second, because of the confidentiality provisions covered by HIPAA, the Board would be unable to disclose any information discussed in the closed session, which makes the vote on disclosure in open session moot.
- Ms. Monson advised that the Board could postpone any action resulting from the closed session. She also stated that the Board is not required to vote on going into closed session, unless it is in the rules.
- President Breslin suggested going into closed session to hear the member appeal while there was still a quorum.

Public comment on all matters pertaining to the closed session: None.

Action: Motion was moved and seconded by the Board to hold a closed session to hear the member appeal with the understanding that formal action cannot be taken without a quorum.

Motion passed 4-0.

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.

- 02132014-20 Action item (Re-ordered) Vote on member's appeal (President Breslin)  
Staff recommendation: Uphold HSS decision.  
Documents provided to Board prior to meeting:
  1. Memo from HSS with supporting documentation; and
  2. Cover letter from member to Health Service Board dated November 15, 2013.

### Reconvene in Open Session

- 02132014-21 Action item (Re-ordered) Vote to elect whether to disclose any or all discussion held in Closed Session (San Francisco Administrative Code 67.12(a)) (President Breslin)  
Public Comments: None.
  - Dr. Shlain departed the meeting at the end of the closed session, resulting in the lack of a quorum.Action: No vote was taken.
- 02132014-22 Action item (Re-ordered) Possible report on action taken in closed session (President Breslin)  
Public Comments: None.  
Action: No vote was taken.
- 02132014-10 Discussion item (Re-ordered) Director's Report (Lisa Ghotbi)
  - HSS Personnel
  - Finance, Operations, Data Analytics, Communications, Wellness/EAP, Vendor Contracts
  - Meetings with Key Departments

- Other additional updates

Documents provided to Board prior to meeting:

1. Director's report;
  2. Reports from Operations, Data Analytics, Communications, Health Promotion and Wellness, and Employee Assistance Program.
- Ms. Ghotbi reported that many of the items in her Director's Report have already been addressed; however, she wanted to highlight HSS' move on March 14, 2014 from the second floor at 1145 Market Street to the third floor.
  - The new office space on the third floor is configured with private rooms for member consultation and will be large enough for spouses or family members to meet with a benefits analyst.
  - The wellness team was scheduled to move to the first floor of 1145 Market Street on February 28, 2014 and open the Wellness Center. A grand opening is planned for April or May.
  - Ms. Ghotbi also reported that the wellness report has been completed and is under final review. It will be distributed to the Board soon.
  - The Director's Report may be viewed on the myss.org website.

Public comments: Claire Zvanski, retiree representative, inquired into office space for the Employee Assistance Program ("EAP") staff.

Ms. Ghotbi responded that the EAP staff will be moving into the Wellness Center on the first floor since they are a part of the wellness team, and will be expanding their services as a result of the expansion of the wellness program. EAP staff will be able to meet with employees in private as the Wellness Center is sectioned off to allow for privacy.

- 02132014-11 (Re-ordered) Discussion item Update on Financial Reporting as December 31, 2013 (Pamela Levin)

Documents provided to Board prior to meeting:

  1. Financial update memo;
  2. Report for the General Administrative Fund;
  3. Report for the Trust Fund.
    - Pamela Levin, HSS Chief Financial Officer, presented the financial update as of December 31, 2013. See financial update memo and attachments.

Public comments: Claire Zvanski, RECCSF representative, suggested that Ms. Levin actively engage the Controller and the Mayor's office regarding understanding HSS' budget and finances. She also suggested that HSS remind the City of the millions of dollars it has saved the City through the rates.
  
- 02132014-16 (Re-ordered) Discussion item Report on network and health plan issues (if any) (Respective plan representatives)

Public comments: None.
  
- 02132014-17 (Re-ordered) Discussion item Opportunity to place items on future agendas

  - Commissioner Scott reported that he will be unable to attend the March 13, 2014 Board meeting due to pre-planned travel to a conference for his church.

Public comments: None.
  
- 02132014-18 (Re-ordered) Discussion item Opportunity for the public to comment on any matters within the Board's jurisdiction

Public comments: Herbert Weiner made a correlation between professional football and City government, stating that there are too many bullies at the worksite who act like the Miami Dolphins coach, whose behavior resulted in a major scandal. He stated that City government needs people in administration who behave like the Seattle Seahawks' coach, who likes his players and his players like him. If people like their employees, the employees are more productive.

Dennis Kruger, retired and active firefighters' representative, congratulated Commissioners Breslin and Ferrigno on their overwhelming re-election to the

Health Service Board. He also asked about Retirement being located in the same building as HSS.

Ms. Ghotbi stated that being co-located in the same building with Retirement makes a lot of sense given the number of retirees HSS sees on a daily basis. There has been a snag in the negotiations with Retirement moving into 1145 Market Street, but she is hopeful that the issues can be worked out.

Ms. Monson stated that she did not think the closed session decision to not hold a vote was clear and wanted to clarify for the record.

President Breslin responded that there was no vote following the closed session due to the lack of a quorum.

Ms. Monson stated that everything discussed in today's closed session appeal was covered under the confidentiality provisions of HIPAA and, therefore, could not have been disclosed in open session even if the Board had wanted to. She stated that the vote issue was moot due to the confidentiality issue.

President Breslin thanked Ms. Monson for filling in for Erik Rapoport at this meeting.

- Adjourn: 3:59 p.m.

## 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 at the designated time at the end of the meeting.

**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.

The following services are available upon request:

- American Sign Language interpreters will be available upon request.
- A sound enhancement system will be available upon request at the meeting.
- Minutes of the meeting or hearing are available in alternative formats.

If you require the use of any of these services, please contact Health Service Board Secretary, Laini K. Scott, at (415) 554-1722 or by email at [laini.scott@sfgov.org](mailto:laini.scott@sfgov.org) at least 72 hours prior to the meeting.

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](http://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 meetings and its committee meetings.
- The chair of the meeting may order the removal from the meeting room of any person(s) in violation of this rule.
- 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 Laini K. Scott at (415) 554-1722 or email at [laini.scott@sfgov.org](mailto:laini.scott@sfgov.org).