



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

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Commissioner

Abbie Yant, MA, RN
Executive Director
Health Service System

Holly Lopez
Executive Secretary

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HEALTH SERVICE BOARD

REGULAR MEETING MINUTES

Thursday, April 13, 2023, 1:00 pm
City Hall, Room 416
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

and

VIRTUAL PRESENTATION BY SFGOV TV and Webex

Remote Meeting Access

The Health Service Board welcomes public participation during public comment periods. There will be an opportunity for general public comment at the beginning of the meeting, and there will be an opportunity to comment on each discussion or action item on the agenda. Each comment is limited to 3 minutes. For those attending remotely, the Commission will hear up to 30 minutes of remote public comment total for each agenda item. Remote public comment from people who have received an accommodation due to disability will not count toward the 30-minute limit.

Watch at 1:00 pm on April 13, 2023 (via [SFGovTV schedule](#))

Click the link to join the meeting – [April 13, 2023 HSB WebEx link](#)

Public Comment Call-In: 415-655-0001 / Access Code: 2592 183 9383 Webinar Password: 1145

Providing Public Comment:

1. Dial **415-655-0001** and then enter access code **2592 183 9383** then #
2. Enter the Webinar Password: 1145
3. **Press #** again to enter the meeting as an ATTENDEE
4. You will hear a beep when you join the meeting as a participant.
 - a. Stop and LISTEN
 - b. Wait for Public Comment to be announced.
5. When Public Comment is called, dial * then **3** to be added to the speaker line.
6. You will then hear “You have raised your hand to ask a question, please wait to speak until the host calls on you.” Callers will hear silence when waiting for their turn to speak.
7. To withdraw your question, press * then **3**. – you will hear: “You have lowered your hand.”
8. When the system message says “Your line has been unmuted” - **THIS IS YOUR TIME TO SPEAK.**
9. When the Commission Secretary states “Welcome Caller,” you are encouraged to state your name clearly. As soon as you speak, you will have **3 minutes** to provide your comments.
10. Once your 3 minutes have expired, you will be moved out of the speaker line and back as a participant in the meeting. You will hear “Your line has been muted.”
11. Participants who wish to speak on other public comment periods can stay on the meeting line and listen for the next public comment opportunity.

Best Practices when Calling in for Public Comment:

- Call from a quiet location
- Speak slowly and clearly
- Turn down any televisions or radios around you
- Address the Commission as a whole, do not address individual Commissioners

Written Public Comment

Persons unable to attend the meeting may submit written public comments regarding an agenda item. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. Written public comments expected to be part of the official record should be submitted to the Board email, health.service.board@sfgov.org, and **received by 5 pm on Wednesday, April 12, 2023**, before the meeting. Members can also call 628-652-4646 with any questions.

All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the body of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

1. **CALL TO ORDER:** 1:01 pm

2. **ROLL CALL:**

President Randy Scott- Present
Vice President Mary Hao- Present
Commissioner Karen Breslin- Excused
Commissioner Chris Canning- Present
Commissioner Stephen Follansbee, M.D-Excused
Commissioner Claire Zvanski-Present

3. **GENERAL PUBLIC COMMENT – An opportunity for members of the public to comment on any matter within the Board’s jurisdiction that is not on the agenda, including requesting that the Board place a matter on a future agenda.**

PUBLIC COMMENT:

An anonymous member of the public thanked the Health Service Board for their work now and during the pandemic and expressed his desire to be more civically involved.

WRITTEN PUBLIC COMMENT:

Paul Trapani, an active employee, expressed concern about available dental dentists, informed the Board that the California Dental Association filed a lawsuit against Delta Dental California, and suggested the Health Service Board consider other dental insurance providers for the next plan year.

4. **APPROVAL (with possible modifications) OF THE MINUTES OF THE MEETINGS SET FORTH BELOW: (Action)**

[February 6, 2023, HSB Finance and Budget Committee Meeting Minutes to be Approved](#)
[February 6, 2023, HSB Governance Committee Meeting Minutes to be Approved](#)
[March 23, 2023, HSB Regular Meeting Minutes to be Approved](#)

President Scott said the February meeting minutes were removed from the March agenda and they needed to be approved. Vice President Hao submitted edits for the March 23, 2023, Regular Board Meeting Minutes, noting that Commissioner Canning’s vote was not listed in the voting sections.

President Scott received clarification since the last meeting that a roll call vote is required for each action item for full transparency of Board member votes and allows those members of the public to both hear the votes and the votes can be transcribed in the closed captioning.

Commissioner Canning moved to approve the February 6, 2023 HSB Finance and Budget Committee Meeting Minutes, February 6, 2023, HSB Governance Committee Meeting Minutes, and the March 23, 2023, HSB Regular Meeting Minutes. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Canning, Hao, Scott, Zvanski

Noes: None

Excused: Breslin, Follansbee

ACTION: The Health Service Board unanimously approved the February 6, 2023 HSB Finance and Budget Committee Meeting Minutes, February 6, 2023, HSB Governance Committee Meeting Minutes, and the March 23, 2023, HSB Regular Meeting Minutes.

5. **PRESIDENT’S REPORT: (Discussion)**

President Scott read the President’s statement from the San Francisco Health Service System 2022 Annual Report. He signed the message on behalf of the full Health Service Board.

The San Francisco Health Service System Board is dedicated to making high-quality and affordable medical, dental, and vision care available to SFHSS members and administering the Trust in accordance with the City Charter and solely for the benefit of the members. The mission, vision, and core values of the HSS Strategic Plan have framed our efforts for the results and accomplishments defined in this year’s annual report. In addition to the Department Executive Leadership changes this year, this has been particularly challenging to HSS operations in meeting our high standards of client service. On behalf of the Health Service Board, I wish to commend the HSS leadership and administrative staff. And I’m talking about all of those who are doing the back office work of claims and customer service and phone calls and all of the other things that our team members do. Under the outstanding leadership of Executive Director Abbie Yant, for their continued commitment and unwavering dedication to providing quality service to HSS members in these extraordinary times. The Board renews its commitment to be active in the implementation, assessment, communication, and evaluation of the Health Service System Strategic Plan for the upcoming years of 2023 and beyond. As we seek to better serve our members through responsible stewardship of the benefits administration process.

PUBLIC COMMENT: None

6. **DIRECTOR’S REPORT: (Discussion)**

[April 13, 2023, Director’s Report](#)

Abbie Yant, SFHSS Executive Director presented the following items:

- Budget Update
- SFUSD-Emergency Status
- Blackout Notice Reminder
- Health Value Initiative (“HVI”) Benchmarking Study
- Racial Equity, Diversity & Cultural Heritage Celebrations
- Administration Updates:
- Health Service System Divisional Reports
 - Human Resources Personnel
 - Operations Updates
 - Enterprise Systems and Analytics
 - Member Services
 - Communications
 - Finance and Budget
 - Contracts
 - Well-Being

Executive Director Yant said the ACO study between the San Francisco Health Service System and UC Berkeley ([Board Education Topic](#) presented on December 9, 2021) has been published and Catalyst for Payment Reform (CPR) will host a [webinar titled “Partnering for High-Value Care”](#) at which the Health Service System will present. President Scott reminded the Board that their attendance would be recorded as self-study education hours.

President Scott noted the Board’s concern about trying to increase staff recruitment and onboarding and expressed his full support in the efforts to look at internal and external resources to address

staffing issues. President Scott acknowledged the continuous work by staff day in and day out and thanked the Operations Manager for representing the team today. Commissioner Zvanski welcomed the three new staff members.

PUBLIC COMMENT: None

7. SFHSS FINANCIAL REPORT AS OF FEBRUARY 28, 2023: (Discussion)

[SFHSS Financial Reporting as of February 28, 2023, Memo](#) and [SFHSS and Financial Reporting as of February 28, 2023 Presentation](#)

Presented by Iftikhar Hussain, SFHSS Chief Financial Officer

- SFHSS Financial Report Highlights
 - Employee Benefit Trust Fund
 - Health Sustainability Fund
 - General Fund Administrative Budget
 - Fiscal Year End 2024 and 2025 Budget Update

Iftikhar Hussain said the Mayor's Office informed the Health Service System that due to the worsening revenue projections, the cost reduction target has increased from \$200,000 to \$419,000. The Health Service System is negotiating the final numbers with the Mayor's Office. Vice President Hao asked if there are reduction targets for the fiscal year 2024-2025. Iftikhar Hussain said the cumulative second year cost reduction target is \$479,000.

PUBLIC COMMENT: None

8. SFHSS 2022 ANNUAL REPORT: (Action)

[SFHSS 2022 Annual Report](#) and [SFHSS 2022 Annual Report Presentation](#)

Abbie Yant, SFHSS Executive Director presented the following items:

- 2020-2022 Strategic Plan
- Who We Serve
- Organizational Excellence
- Focus on Achieving Strategic Goals
- Tracking Population to Improve Racial Equity
- Summary of Accomplishments

President Scott commended the executive team, administrative staff, and management team for their work in a very challenging year of transition and a year of executive leadership changes. Commissioner Canning commended Executive Director Yant and the team's leadership and the tremendous amount of work, synthesized in an easily digestible fashion. Commissioner Canning thanked everyone for the amount of effort they've put into improving our Department and service to our members. President Hao said the report is remarkably clear that the whole department was involved, it wasn't just a leadership-led effort, and the fingerprints of everyone who touched the members in some way are reflected in this report. Vice President Hao thanked everyone for putting the members first and thinking about the voice and needs of our customers and how we serve them. Commissioner Zvanski said the achievements are remarkable considering the staff shortages and it speaks to the commitment of our staff and the quality of their work.

Commissioner Canning moved to approve the SFHSS 2022 Annual Report. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Canning, Hao, Scott, Zvanski

Noes: None

Excused: Breslin, Follansbee

ACTION: The Health Service Board unanimously approved the San Francisco Health Service System 2022 Annual Report.

Rates and Benefits

9. PRESENTATION ON THE 2023 RATES AND BENEFITS CALENDAR FOR THE PLAN YEAR 2024 (Discussion)

[Rates and Benefits Calendar Schedule for Plan Year 2024](#)

Abbie Yant, Executive Director said there are no changes to the calendar and recommended releasing April 27th meeting date hold if all agenda items are presented today.

PUBLIC COMMENT: None

10. SFHSS HEALTH PLAN RISK SCORES: (Discussion)

[Health Plan Risk Scores](#) and [Health Plan Risk Scores presentation](#)

Rin Coleridge, Director of Enterprise Systems and Analytics SFHSS presented the following items:

- Risk Band Profiles by Age & Gender Cohort
- SFHSS Risk Scores Population Overview: Concurrent Scores 2019-2022
- Prospective Scores 2019-2022
- Major Health Conditions and Disorders by Risk Band Profiles: Commercial Population
- Members and Cost Distribution by Risk Category: Commercial Population
- Relative Commercial Plan Performance – Actual PMPY vs Expected PMPY
- SFHSS Employees – Prospective Risk Score by Race / Ethnicity
- Demographics in High Vulnerability San Francisco Zip Codes – Commercial
- Workstreams and Next Steps

President Scott asked why is the report presented, what is this data and how is it linked to premium increases. Rin Coleridge said the report looks at previous cost utilization to see the risks and opportunities in our population to predict future costs and the premium. President Scott thought the health plans do the same analysis and asked why we don't rely on the health plan analysis. The health plans provide their claims data. The San Francisco Health Service System does due diligence to double-check and see if the internal data aligns with plan data. President Scott the report helps the Board understand member issues and agreed it's the fiduciary responsibility of the Board to gather and review all the information to make decisions that impact the budgets and funds the Board oversees. President Scott thanked Rin and the team for presenting the information clearly.

Commissioner Zvanski asked why the Sunset District and Richmond District were not represented in the highly vulnerable zip codes demographics. Rin Coleridge said the report highlights the most

predominant census tracts on the vulnerability index. Rin Coleridge said some parts of the Sunset and Richmond zip codes are very low on the vulnerability index and some are high because a zip code is so much larger so although it may not be highlighted doesn't mean the vulnerability is not noted. Rin said the appendix lists additional zip codes as well. Executive Director reassured the Board that data on all populations were included and the ones that are highlighted are the ones that rise to the top of the vulnerability index.

President Scott thanked the team for a great deal of thoroughness in the report and pointed out how much this information contributes to the negotiations for the rates and benefits cycle each year.

PUBLIC COMMENT: None

BREAK: 2:10- 2:20 pm

ROLL CALL:

President Randy Scott- Present
Vice President Mary Hao- Present
Commissioner Chris Canning- Present
Commissioner Claire Zvanski-Present

11. REVIEW KAISER PERMANENTE ACTIVE EMPLOYEE AND EARLY RETIREE HMO PLAN 2022 CLAIMS AND UTILIZATION EXPERIENCE: (Discussion)

[Kaiser Permanente Active Employee and Early Retiree HMO Plan 2022 Claims and Utilization Experience](#)

Mike Clarke, Aon presented the following items:

- Kaiser Non-Medicare HMO Plan 2022 Experience
- Insights-Medical and Prescription Drug Claims
- Active Employees: Top 5 Diagnostic SFHSS Spend Categories
- Early Retiree: Top 5 Diagnostic SFHSS Spend Categories
- COVID-19 Expense- Active Employees (\$4.6M) and Early Retirees (\$1.9M)
- Inpatient Admission Categories (per 1,000 Plan Members)
- Outpatient Visit Categories (per 1,000 Plan Members) Active and Early Retirees
- Outpatient Care Drill-Down -Telehealth Visits (per 1,000 Members)
- Health Status/Immunization/Preventative Care Rates by Population Active, Early Retirees, Medicare Retirees

President Scott pointed out the reduction of 1,276 covered lives in the total average covered count in the Kaiser plan between 2021 and 2022 for the active employee population (page 8 of the presentation) and asked if people enrolling in other plans or if people terminating their employment with the City was the larger driver in the reduction. Mike Clarke said every plan had lower average enrollment in the plan year 2022 versus the 2021 plan year.

Commissioner Zvanski asked if Kaiser's pharmacy medication use policies have any impact on whether or not their patients are demanding or requiring more medications that are advertised through television or the media to be available for prescription. Mike Clarke said his general observations are that Kaiser Permanente has policies and strategies within the organization about what medications get dispensed, close coordination with physicians, and plan management strategies would dictate trying to achieve appropriate dispensing of medications to members. Denise Rodriguez, Kaiser Permanente Director, Strategic Accounts, Public Sector, Northern CA said Kaiser Permanente has a group of pharmacists and physicians that work together to identify

the most effective pharmaceuticals available and they look at a combination of generics primarily because they're most cost-effective but they also look at brand drugs where maybe there isn't a generic equivalent. Physicians prescribe medications and have conversations about why they may or may not work. A member can discuss with their physician if they feel that medication might be a better solution for treating their condition. Our physicians have the ability without prior approval to have it written as they request. Our generic compliance rate is very high with our physicians, it's over 90% and we're very successful.

Commissioner Zvanski noticed higher percentages of adult sedentary among Medicare retirees, Actives, and Early Retirees. Commissioner Zvanski asked if there is specific outreach or programs for this health risk indicator. Denise Rodriguez said Kaiser started measuring activity as a vital sign a few years ago so physicians can take note and discuss the importance of movement with their patients, particularly with certain chronic conditions like diabetes can lower your blood sugar, etc. If the physician sees it's a chronic condition and there's some real concern around that they can refer them to our Well-being Department, classes, and additional resources. Kaiser sends promotions to members directly through email.

PUBLIC COMMENT: None

12. REVIEW SELF-FUNDED NON-MEDICARE PPO PLAN 2022 CLAIMS AND UTILIZATION EXPERIENCE AND APPROVE THE USE OF ONE-THIRD OF THE STABILIZATION RESERVE DEFICIT AS OF DECEMBER 31, 2022 ACTION FOR 2024: (Action)
[Self-Funded Non-Medicare PPO Plan 2022 Claims and Utilization Experience and Approve Use of One-Third of the Stabilization Reserve Deficit as of December 31, 2022](#)

Mike Clarke, Aon presented the following items:

- Today's Recommendation
- Preface – Non-Medicare PPO Plan 2022 Experience
- 2022 Plan Experience Observations: Overall Cost Observations – Cost Increases Consistent with National Trend
- PPO Data, Blue Shield+ UHC in 2022 Verses UHC in 2021
- PPO Data, Blue Shield in 2022
- Prescription Drug PMPM Cost is Lower Under BSC in 2022 vs. UHC in 2021
- Looking ahead to 2024 Non-Medicare PPO Plan Rating
- Non-Medicare PPO Plan December 31, 2022, Rate Stabilization Fund Recommendation
- Background
- Today's Recommendation
- Recent Non-Medicare PPO Plan Rate Stabilization Actions
- Non-Medicare PPO Plan Rate Stabilization Reserve Summary
- Non-Medicare PPO Plan 2022 Plan Year Reconciliation
- Today's Recommendation

No discussion or questions from the Board members.

Commissioner Canning moved to approve the use of one-third of the December 31, 2022 stabilization reserve deficit amount of \$746,000 (or one-third of \$2,238,000) to be applied towards buy-up of rates across all rating tiers for the Non-Medicare PPO Plan (including Chose Not Available) for the plan year 2024, and apply proportionately between active employees and early retirees. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Canning, Hao, Scott, Zvanski

Noes: None

Excused: Breslin, Follansbee

ACTION: The Health Service Board unanimously approved the use of one-third of the December 31, 2022 stabilization reserve deficit amount of \$746,000 (or one-third of \$2,238,000) to be applied towards buy-up of rates across all rating tiers for the Non-Medicare PPO Plan (including Chose Not Available) for the plan year 2024, and apply proportionately between active employees and early retirees.

13. REVIEW AND APPROVE VSP VISION FULLY INSURED 2024 RATES AND CONTRIBUTIONS:

(Action)

[VSP Vision Fully Insured 2024 Rates and Contributions](#)

Mike Clarke, Aon presented the following items:

- Rating Methodology Preface
- Health Plan Funding
- Health Plan Rate Setting Process for Next Plan Year
- Introduction: VSP Vision Fully Insured Rate Renewal
- Today's Recommendation
- Current 5-Year Agreement Background
- Recent Loss Ratio Experience
- Enrollment Shifts into Premier Plan Since 2018
- 2024 VSP Vision Fully Insured Rate Renewal
- Recommendation for Health Service Board Action

No discussion or questions from the Board members.

Vice President Hao moved to approve the VSP fully insured 2024 rates and contributions. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Canning, Hao, Scott, Zvanski

Noes: None

Excused: Breslin, Follansbee

ACTION: The Health Service Board unanimously approved the VSP fully insured 2024 rates and contributions.

14. REVIEW AND APPROVE RETIREE 2024 DENTAL RATES AND CONTRIBUTIONS FOR FULLY INSURED PLANS (DELTA DENTAL PPO PLAN, DELTACARE USA HMO, UHC DENTAL HMO): (Action)

[Retiree 2024 Dental Rates and Contributions for Fully Insured Plans \(Delta Dental PPO Plan, DeltaCare USA HMO Plan, UnitedHealthcare \(UHC\) HMO Plan\)](#)

Mike Clarke, Aon presented the following items:

- Retiree Dental Plans 2024 Renewal Recommendation Summary
- Rate Setting Methodology Preface: Health Plan Funding Method Comparison by SFHSS Plan
- Health Plan Rate Setting Process for Next Plan Year
- Current (2023) Retiree Dental Plans Monthly Rates and Background-2023 Rating Actions
- Delta Dental 2024 Retiree PPO Plan Renewal
- DeltaCare USA 2024 Retiree HMO Plan Renewal
- UHC 2024 Retiree HMO Plan Renewal
- Recommendation for Health Service Board Action

Commissioner Zvanski asked to what extent has the expansion of the Smile Way Program impacted any of the rates we're looking at today. Mike Clarke said we have seen a higher number of members come into Smile Way, most notably because of information that's now being passed securely between Kaiser and Delta Dental with intent to increase the identification of individuals who are eligible combined with the Smile Way Program recently increasing from 5 chronic conditions to 9 for part of that identification. Julie Fernandez, Delta Dental insurance company account manager, said the Smileway program went added 9 additional conditions so it went from 5 conditions to 14, and, it's going to be beneficial for those members that are experiencing those chronic conditions to allow them additional cleanings as we continue to strive to get those preventative services up. We didn't expect there to be a huge impact in terms of the utilization but we're three months in and we're excited to see how it positively impacts the overall population.

Vice President Hao moved to approve the Retiree 2024 Dental Rates and Contributions for Fully Insured Plans (Delta Dental PPO Plan, DeltaCare USA HMO Plan, UnitedHealthcare (UHC) HMO Plan). Commissioner Canning seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Canning, Hao, Scott, Zvanski

Noes: None

Excused: Breslin, Follansbee

ACTION: The Health Service Board unanimously approved the Retiree 2024 Dental Rates and Contributions for Fully Insured Plans (Delta Dental PPO Plan, DeltaCare USA HMO Plan, UnitedHealthcare (UHC) HMO Plan).

15. SUTTER HEALTH LEGAL SETTLEMENT 2024 RECOMMENDED RATING BUY-DOWN ACTION PER HEALTH SERVICE BOARD POLICY 213 FOR BSC HMO / UHC EPO PLANS AND NON-MEDICARE PPO PLAN: (Action)

[Sutter Legal Settlement 2024 Recommended Rating Buy-Dow Action Per Health Service Board Policy 213 for BSC HMO and UHC EPO Plans and Non-Medicare PPO Plan](#)

President Scott said the Health Service System is a settlement class member of the California-based class action lawsuit against Sutter Health. The Health Service System received approximately \$15 million of an anticipated \$17 million settlement award and deposited it into the medical trust fund. The Health Service Board created and approved Policy 213: Legal Settlement Policy (January 2023) to outline how to use legal settlement payments to the Health Service System. This agenda item is the first time the Board will take action on the payment fund award based on the recommendations presented today.

Mike Clarke, Aon presented the following items:

- Today's Recommendation
- Background -New Health Service Board Legal Settlement Policy 213
- Background – Recent Sutter Health Legal Settlement
- Calculations and 2024 Rating Buy-Down Recommendations
- Today's Recommendation for 2024 Rating Buy-Down Action for BSC HMO & UHC EPO Plans and Non-Medicare PPO Plan from Sutter Health Legal Settlement Dollars

President Scott restated the recommendation to use the full settlement award for use in the 2024 health plans outlined today.

Commissioner Canning moved to approve Sutter Legal Settlement Recommended Rating Buy-Dow Action Per Health Service Board Policy 213 for 2024 BSC HMO and UHC EPO Plans and Non-Medicare PPO Plan. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT:

Dennis Kruger, a retired firefighter, asked why Medicare recipients are not included in the litigation.

Iftikhar Hussain, SFHSS CFO, said the litigation did not involve Medicare recipients. The litigation only involved self-employed health plans and commercial plans, thus the recommendation outlines the principle award matches the self-employed plans. President Scott reiterated the settlement did not involve Medicare recipients and the Board has moved to apply the award settlement to the affected population.

VOTE:

Aye: Canning, Hao, Scott, Zvanski

Noes: None

Excused: Breslin, Follansbee

ACTION: The Health Service Board unanimously approved the Sutter Legal Settlement Recommended Rating Buy-Dow Action Per Health Service Board Policy 213 for the 2024 BSC HMO and UHC EPO Plans and Non-Medicare PPO Plan.

REGULAR BOARD MEETING MATTERS

16. REPORTS AND UPDATES FROM CONTRACTED HEALTH PLAN REPRESENTATIVES: **(Discussion)**

No updates or reports from health plan representatives.

PUBLIC COMMENT: None

17. ADJOURNMENT: 3:33 pm

Summary of Health Service Board Rules Regarding Public Comment

1. There will be an opportunity for general public comment at the beginning of the meeting, and there will be an opportunity to comment on each discussion or action item on the agenda.
2. A member may comment on any matter within the Board's jurisdiction as designated on the agenda.
3. A member of the public has up to three (3) minutes to make pertinent public comments.
4. Public Comment can be given in-person, remotely, or written.
5. Members may submit their comments by email to health.service.board@sfgov.org by 5 pm the day before the meeting start time. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the subject line of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.
6. For those attending remotely, the Commission will hear up to 30 minutes of remote public comment total for each agenda item. Remote public comment from people who have received an accommodation due to disability will not count toward the 30-minute limit.

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>.

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 outlined in Chapter 67A of the San Francisco Administrative Code.

Disability Access and Accommodation

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 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. To obtain a disability-related modification or accommodation, including auxiliary aids or services, to participate in the meeting, please contact Holly Lopez, at 628-652-4646 at least 48 hours before the meeting, except for Monday meetings, for which the deadline is 4:00 pm the previous Friday.

City Hall Room 416 is wheelchair accessible. This meeting will be broadcast and captioned on SFGovTV. Remote public participation is available upon request for individuals who cannot attend in person due to disability. Making a request to participate remotely no later than one (1) hour prior to the start of the meeting helps ensure the availability of the meeting link. Sign Language Interpretation is also available upon request. If requesting remote Sign Language Interpretation, please submit an accommodation request a minimum of 4 business hours prior to the start of the meeting. Allowing a minimum of 48 business hours for all other accommodation requests (for example, for other auxiliary aids and services) helps ensure availability. To request an accommodation, please contact Holly Lopez, holly.lopez@sfgov.org 628-652-4646.

To access the meeting remotely as an accommodation, please use [April 13, 2023 HSB Webex Link](#) or call 415-655-0001. Please find instructions at the beginning of this agenda for how to use WebEx for the purposes of remote public comment.

Sensitivity to Chemical-based Products

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.

Location of Materials

If any materials related to an item on this agenda have been distributed to the Health Service Board after the 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 Holly Lopez at 628-652-4646 or email holly.lopez@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: 628-652-4646

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.