



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

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Vice President

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Abbie Yant, MA, RN
Executive Director
Health Service System

Holly Lopez
Executive Secretary

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<http://www.sfhss.org/>

HEALTH SERVICE BOARD

MEETING MINUTES

Thursday, April 8, 2021

REGULAR MEETING AT

1:00pm

VIRTUAL PRESENTATION BY SFGOV TV

Due to the COVID-19 health emergency and to protect our Board Members, SFHSS staff, and members of the public, the Board's Meeting Room (Room 416) is closed.

Remote Meeting Access

Watch at 1:00 pm on April 8, 2021 (via SFGovTV) - <https://sfgovtv.org/hsbLIVE>

Click the link to join the meeting - <https://bit.ly/3ft1tgH>

Public Comment Call-In: 415-655-0001 / **Access Code:** 187 296 5890

Providing Public Comment:

1. Dial **415-655-0001** and then enter access code **187 296 5890** then **#**
2. **Press #** again to enter the meeting as an ATTENDEE
3. 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.
4. When Public Comment is called, dial * then **3** to be added to the speaker line.
5. 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.
6. To withdraw your question, press * then **3**. – you will hear: "You have lowered your hand."
7. When the system message says "Your line has been unmuted" - **THIS IS YOUR TIME TO SPEAK.**
8. When the President or 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.
9. 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."
10. 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 comment 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 7th** before the meeting. Members can also call 628-652-4646 with any questions.

All comments received by the deadline will be read aloud by the Board Secretary up to the three-minute maximum allotted time to each commenter. 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:** 1:00 pm

2. **ROLL CALL:**

President Stephen Follansbee, M.D.-present
Vice President Chris Canning-present arrived at ~1:40 pm, departed at 4:51pm
Commissioner Karen Breslin-present
Commissioner Mary Hao-present
Commissioner Randy Scott-present, excused 3:00-3:30pm
Commissioner Claire Zvanski-present

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

The Health Service System meeting minutes are available on the SFHSS website at <https://bit.ly/2Rjz4Q5> HSB Regular Meeting Minutes from March 11, 2021

President Follansbee affirmed the following meeting minutes HSB Regular Meeting Minutes from March 11, 2021. Commissioner Zvanski stated she sent meeting minute edits to Board Secretary, Holly Lopez.

Commissioner Scott moved to accept the meeting meetings for the HSB Regular Meeting Minutes from March 11, 2021, with submitted edits from Commissioner Zvanski. Commissioner Breslin seconded the motion.

PUBLIC COMMENT: None

ACTION: The Health Service Board unanimously approved the HSB Regular Meeting Minutes from March 11, 2021.

4. **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: None

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

No report for April.

Commissioner Breslin asked if the Board of Supervisors appointed a new Supervisor to the Health Service Board. President Follansbee shared the Board of Supervisor President has not appointed a new Supervisor to the Health Service Board.

PUBLIC COMMENT: None.

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

The Director’s Report is available on the SFHSS website at <https://bit.ly/323j2fw>

Executive Director Yant presented the following items in her Director’s Report:

- SFHSS 2020 Audit Report and 2021 Audit Plan
- New Medical Plan Offering
- COVID-19 Update

- Reminder: Vendor Black Out Period-Extended
- Health Plan Experience Reporting-SFHSS Measurement Plan
- Racial Equity Action Plan Update
- April 2021 Legislative Tracking
- Medicare Plan Evaluation
- Follow up from Health Plans
 - Kaiser Permanente Doctor Leave of Absence Overview
 - UHC Silver Sneakers
- HSB Quarterly Email Tracker
- Divisional Updates
 - Personnel
 - Operations: Enterprise Systems and Analytics (ESA) and Communications
 - Finance
 - Contracts
 - Well-Being

Commissioner Scott asked whether the Medicare Plan evaluation will lead to a Request for Proposal (R.F.P.). Executive Director Yant explained the Medicare Plan evaluation will determine whether to conduct an R.F.P and if so, a recommendation would come forth in June to adequately prepare a timeline and outline any Board involvement.

Commissioner Breslin asked if there is any indication of when the City will return to in-person meetings. Executive Director Yant stated there is no set date to return to an in-person meeting. Executive Director Yant stated the vaccine is still the priority and that all City policies have been based on scientific data which will also determine any future City policies to return to offices. President Follansbee re-iterated the need for vaccination efforts as they are effective in reducing serious hospitalizations, intensive care admissions, and transmission to others. President Follansbee encouraged everyone to support each other in getting the vaccine.

Commissioner Zvanski asked if the Managing Implicit Bias training conducted on March 29, 2021, is available remotely or if another training is available whether virtual or pre-recorded. Executive Director Yant said various programs are available remotely because the training involves high participant engagement. Leticia Pagan, SFHSS Senior Health Planner, said the recent training was conducted by the Department of Human Resources so the timing was based on their training schedule. Leticia Pagan also shared the International Foundation of Employee Benefits Plans offers training on race, equity, diversity, and inclusion and will share upcoming opportunities with Board Secretary. President Follansbee attended the training and appreciated the small group setting that allowed robust conversations to reflect on bias within individuals, departments, and the city as a whole.

PUBLIC COMMENT: None.

7. HSS FINANCIAL REPORTING AS OF FEBRUARY 28, 2021: (Discussion)

The HSS Financial Reporting of February 28, 2021, memo is available on the SFHSS website at <https://bit.ly/3g4eIVz>

Larry Loo, Chief Financial Officer presented the following items:

- Executive Summary
- Employee Benefit Trust Fund (Trust Fund)

- United Health Care PPO
- Blue Shield Access+ Flex Funded Plan
- Blue Shield Trio Flex Funded Plan
- Delta Dental PPO (Actives Only) Self-Funded Plan
- Other Trust Fund Notes
- General Fund Administrative Budget

NOTE: Vice President Canning arrived during this agenda item.

President Follansbee pointed out there are fewer influenza admissions, hospitalizations, and associated pneumonia due to the pandemic last year. Commissioner Zvanski also noted the decrease in physician visits as well. President Follansbee asked if there are expected high utilization projections this year. Larry Loo said it's too early to tell if there will be high utilizations due to the pandemic and/or members seeking delayed services and that our Actuaries will report any projections in the renewal process.

Commissioner Zvanski asked for an update on the general budget approval process. Larry Loo said the submitted proposals are currently with the Mayor's Budget analysis and he continues to work with both offices to complete the process by June.

PUBLIC COMMENT: None.

8. PRESENTATION ON THE SFHSS COMMUNICATIONS PLAN OVERVIEW: (Discussion)

The SFHSS Communications Plan Overview is available on the SFHSS website at <https://bit.ly/3ga6VFz>

Jessica Shih, Communications Director presented the following items:

- Communication Objectives for 2021
- Target Audience
- Strategy to Achieve Future State
- Collaborate with Solutions Driven Design Thinking Approach
- Tactics-Execute and Iterate on a Continuous Feedback Loop
- Tactics-Communication Channels
- Communication Success Metrics
- Open Enrollment Communications Plan
- Open Enrollment Communications Timeline
- Revamp SFHSS.org in Phases
- Discovery: Improve Member Experience
- Cordico App for 1st Responders: Engagement Plan
- New SFHSS Social Media
- Our Goal is to Deliver Proactive Strategic Communications to Solve Member Needs

President Follansbee commended Jessica Shih for the impressive work and appreciated the scope and depth of the Communication Plan. Commissioner Hao thanked Jessica for building a proactive strategy anticipating member needs. Commissioner Zvanski thanked Jessica for an inclusive communication plan that identified specific member populations such as Hetch Hetchy and retirees, so communication strategies meet their needs. Commissioner Breslin also thanked Jessica for her presentation and suggested nutrition counseling be added to member guides. Commissioner Breslin pointed out another target member audience is those members who live

alone or need language assistance and may need support when it comes to member outreach. President Follansbee asked what our member language preferences are and how that is built into the communication strategies. Jessica Shih said data showed six top languages are preferred amongst members and language accessibility is being explored in webinars and the sfhss.org website. Jessica Shih also shared that her team has ongoing discussions with plan providers to ensure members can select primary care physicians in their preferred language with language translation provided. can request translators when needed. President Follansbee also wondered what rules, regulations, and mandates exist with telemedicine and the importance of educating our members in those options. Executive Director Yant pointed out that the Director of Communications role and Communications Plan Overview was a direct result of the Strategic Plan to build an understanding of our members and their engagement. Executive Director Yant also acknowledged the work of Carol Karimi, Communications Manager, and Ryan Clouse, Graphic Designer who work to carry out the communication plan.

PUBLIC COMMENT: None

RATES AND BENEFITS MATTERS

9. REVIEW AND APPROVE THE HARTFORD FULLY INSURED 2022 RATES AND CONTRIBUTIONS (LIFE INSURANCE, ACCIDENTAL DEATH & DISMEMBERMENT, AND LONG-TERM DISABILITY PLANS): (Action)

The Hartford Fully Insured 2022 Rates and Contributions presentation is available on the SFHSS website at <https://bit.ly/32fjUhe>

Mike Clarke, Aon presented the following items:

- The Hartford-Recommendation Summary
- Introduction
- Introduction -Prior Renewal Background
- Introduction-The Hartford 2022 Plan Year Renewal
- Employer-Paid Coverage-Basic Life Insurance
- Employer-Paid Coverage-Long-Term Disability Insurance
- The Hartford Financial Renewal-Employer-Paid Coverages
- Member-Paid Coverage- Employee Supplemental Life Insurance
- Member Paid Coverage- Dependent Supplemental Life Insurance
- Member-Paid Coverage- Supplemental AD&D Insurance
- The Hartford Financial Renewal- Member-Paid Coverages
- Overall Renewal Summary- Expected Aggregate 2022 Premiums
- Recommendation for HSB Action

Commissioner Scott moved to accept renewal of all life insurance, accidental death, and dismemberment (AD&D) insurance, and long-term disability (LTD) insurance premiums and rates will stay the same for the 2022 plan year given 2022 represents the third year in a three-year rate agreement that commenced on January 1, 2020. Commissioner Canning seconded the motion.

PUBLIC COMMENT: None.

ACTION: The Health Service Board unanimously approved the renewal of all life insurance, accidental death, and dismemberment (AD&D) insurance, and long-term disability (LTD) insurance premiums and rates will stay the same for the 2022 plan year given 2022

represents the third year in a three-year rate agreement that commenced on January 1, 2020.

10. REVIEW AND APPROVE VSP VISION FULLY INSURED 2022 RATES AND CONTRIBUTIONS: (Action)

The VSP Vision Fully Insured 2022 Rates and Contributions presentation is available on the SFHSS website at <https://bit.ly/3mOEMW4>

Mike Clarke, Aon presented the following items:

- Rate Setting Methodology Preface
- Health Plan Funding-Methods Comparison by SFHSS Plan
- Health Plan Rate Setting Process for Next Plan Year
- Introduction- VSP Vision Insured Rate Renewal
- Today's Recommendation- VSP Vision Rate Renewal
- VSP Vision Renewal- Prior 5-Year Agreement Background
- VSP Vision Renewal-Recent Loss Ratio Experience
- Enrollment Shifts Into Premier Plan Since 2018
- VSP Vision Financial Renewal, 2022-2026—Overview
- VSP Vision Financial Renewal, 2022-2026
- VSP Vision Renewal, 2022 Proposed Premiums
- Recommendation for HSB Action-VSP Renewal

Commissioner Scott noted the presentation outlined VSP rating framework for plan years 2022-2026 and asked to clarify what is the 2022 plan year recommendation. Mike Clarke, Aon stated the recommendation is for the plan year 2022 with the understanding that the approval would be an agreed-to rates expectation from VSP for the next five years 2022 through 2026.

Commissioner Breslin asked if the premiums are built into the basic health premium. Mike Clarke clarified that premiums are built into the rate cards for the Medicare and Non-Medicare health plan rate renewals during the Rates and Benefits cycle that are approved in May and June of each year. Commissioner Breslin also asked if members can purchase frames at Costco and Mike Clarke confirmed Costco is one of the providers. Mike Clarke pointed out that the Basic Plan claim experience generally runs equivalent to premiums, except for 2020 given utilization suppression impacts due to the pandemic. Mike Clarke also pointed out that for active employees, based on the M.O.U.'s the Basic Plan vision coverage is paid mostly by the employers, and employers pay for a substantial portion of Basic Plan vision coverage for retirees based on City Charter employer contribution formulas. For the Premier Plan, claims have exceeded premiums regularly, which offers Premier Plan members a good deal for their contribution. President Follansbee asked if there are VSP preferred providers and out-of-network providers. Mike Clarke said there are VSP in-network and out-of-network providers and Aon will deliver follow-up information on the VSP provider network in Northern California. Mike Clarke noted that members are free to visit out-of-network providers, but reimbursements are higher with VSP in-network providers.

President Follansbee asked that although the recommendation outlines plan years 2022-2026, the renewal will be reviewed and voted on each year. Mike Clarke confirmed this process. Erik Rappaport, City Attorney, reiterated that this is a one-year renewal and the Board has the power to review during the annual rates and benefits process. Erik Rappaport stated the year-over-year rates are a commitment by the vendor that can be negotiated if conditions change. Commissioner Zvanski expressed gratitude for VSP and the ability for members to access their ophthalmologist or optometrist through VSP.

Commissioner Scott moved to approve the VSP Vision Fully Insured 2022 Rates and Contributions. Commissioner Hao seconded the motion.

PUBLIC COMMENT: None

ACTION: The Health Service Board unanimously approved the VSP Vision Fully Insured 2022 Rates and Contributions.

Break: 2:58-3:08pm

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

Note: Commissioner Scott was excused from 3:00 pm and returned at 3:30 pm.

11. REVIEW AND APPROVE RETIREE 2022 DENTAL RATES AND CONTRIBUTIONS FOR FULLY INSURED PLANS (DELTA DENTAL PPO PLAN, DELTACARE USA HMO PLAN, UNITEDHEALTHCARE (UHC) HMO PLAN): (Action) agenda item called after agenda item #12
The Retiree 2022 Dental Rates and Contributions for Fully Insured Plans presentation is available on the SFHSS website at <https://bit.ly/3sdTcA5>

Mike Clarke, Aon presented the following items:

- Rate Setting Methodology Preface
- Health Plan Funding-Method Comparison by SFHSS Plan
- Health Plan Rate Setting Process for Next Plan Year
- Retiree Dental Plans Background-Distinguishing Elements
- Retiree Dental Plan Background-Rate History
- Retiree Dental Plans Background-Distinguishing Elements
- Delta Dental Retiree PPO Plan-Plan Design Variations by Type of Dentist Utilized
- Delta Dental Retiree PPO Plan-Member Dentist Utilization by Type of Network Dentist
- Delta Dental Retiree PPO Plan-Finding a Network Dentist
- Retiree Dental Plans Background-2021 Rating Actions
- Retiree Dental Plans 2022 Renewal Summary
- Delta Dental Retiree PPO Plan- 2020 Claim/Fee Experience Summary
- Delta Dental Retiree PPP Plan-SmileWay Benefit
- Delta Dental Financial Renewal-Retiree PPO
- Delta Dental Financial Review-DeltaCare USA HMO
- UHC Financial Renewal-Dental HMO
- Recommendation for HSB Action

Commissioner Breslin recalled a letter written (sent to the Board on February 19, 2021) to the Board from a dentist and pointed out several areas of concern 1. confusion about the different dentist options for members-PPO, Premier, and Out-of-Network dentists, 2. proper procedure for Delta Dental representatives to make visits to dental offices, 3. cost savings advice to dentists and how it may jeopardize the quality of care and 4. low reimbursement rates causing dentists to leave Delta Dental network. Commissioner Breslin asked why non-contracted dentists are not assigned benefits. Mike Clarke stated Delta Dental does not assign benefits to non-contracted dentists because most dentists are either PPO or Premier and thus there is a very low volume of

noncontracted procedures. Commissioner Breslin also asked if Delta Dental assigned or allowed dentists to select participation in PPO or Premier. Commissioner Breslin expressed concern that advice to cut cost decreases the quality of care to members. Commissioner Scott pointed out that any managed care environment will provide counsel to restrain cost and asked Delta Dental to describe what provisions or guidance about cost, quality of services, etc., Delta Dental offers to their contracted dentists. Commissioner Scott acknowledged the concerns brought forth but stated there is not enough to conclude that quality of service is decreased for members. President Follansbee said it would be important to know the member experience and wondered if Delta Dental provides member satisfaction surveys. Executive Director Yant stated the dentist who wrote the letter did not permit the department to pass along their name and the concerns were brought to Delta Dental and rate performance measures and performance guarantees will be outlined in the contract.

Commissioner Zvanski asked if Delta Dental dentists are located in regions where SFHSS members live particularly Sonoma County. Commissioner Zvanski asked about the cost difference between the Premier and out-of-network dentists. Mike Clarke said the co-insurance after the deductible is the same but the starting point to the cost is different. Mike Clarke clarified member cost-share through plan design is identical between Premier and noncontracted dentists, but when a member uses a non-contracted dentist then members can incur balanced billing when charges exceed the Premier fee schedule.

Commissioner Scott asked if the Delta Dental and UHC rate quotes were for one or two years. Mike Clarke said the Delta Dental rates are quoted for the two-year period 2022-2023, and the UHC has always been a one-year quote rate.

Commissioner Breslin recalled in 2019 the Board voted to increase the deductible for Premier and noncontracted dentists and asked what the former rate was. Mike Clarke stated the Premier and noncontracted dentist deductible per person changed from \$50 to \$75 and per family from \$100 to \$150. In return, the member coinsurance for certain major services by PPO dentists decreased from 50% to 40%. Commissioner Breslin expressed concern the prices are too high for members and a lot of members are complaining. President Follansbee pointed out that we don't have any data that suggests PPO dentists provide inferior care compared to Premier dentists and pointed out that Out-of-Network dentists are not reviewed at all by Delta Dental, so we don't have data across all categories. Commissioner Zvanski didn't recall a lot of complaints. Executive Director Yant stated there a few and we are talking to Delta to resolve their issues and SFHSS is working with Delta's new account team to receive regular reporting. Executive Director Yant acknowledged Commissioner Breslin's concerns and although we don't have the data to show an extreme problem SFHSS will work with Delta to get quality indicators and measure performance. President Follansbee agreed the issues are important to discuss and reiterated the Board's responsibility to follow-up with patient satisfaction and quality issues.

Commissioner Zvanski moved to adopt the Retiree 2022 Dental Rates and Contributions for Fully Insured Plans (Delta Dental PPO Plan, DeltaCare USA HMO Plan, UnitedHealthcare (UHC) HMO Plan). Commissioner Scott seconded the motion.

PUBLIC COMMENT:

Herb Wiener, Executive Board member of Protect our Benefits- member urged the Board to approve a comprehensive plan especially for those retirees whose dental needs increase with age and offered to consult with SFHSS to provide feedback to improve dental plans.

Fred Sanchez, Protect Our Benefits member- member applauded the amount of information shared, thanked HSS staff and the Board for prioritizing the member's best interest, and supported the use of a survey to collect data.

ACTION: The Health Service Board unanimously approved the Retiree 2022 Dental Rates and Contributions for Fully Insured Plans (Delta Dental PPO Plan, DeltaCare USA HMO Plan under a 2-year rate guarantee and UnitedHealthcare (UHC) HMO Plan under a one-year rate guarantee.

12. PRESENTATION ON 2021 AON HEALTH VALUE INITIATIVE (“HVI”) ACTIVE MEDICAL PLAN BENCHMARKING STUDY: (Discussion) agenda item called before agenda item #11

The 2021 Aon Health Value Initiative (“HVI”) Active Medical Plan Benchmarking Study is available on the SFHSS website at <https://bit.ly/3mM9XB6>

Mike Clarke, Aon presented the following items:

- Aon Health Value Initiative (HVI)
- Aon HVI Benchmarking for SFHSS-Executive Summary
- Aon Health Value Initiative (HVI) Benchmarks
- 2021 Annual Health Plan Costs Per Employee
- 2021 Health Plan Financial Purchasing Efficiency
- Detailed Profile-2021 Costs and Demographics

2021 Aon Health Value Initiative (“HVI”) Active Medical Plan Benchmarking Study

President Follansbee asked how this information can help future decisions. Mike Clarke said that the use of HMO plans to support the SFHSS members (while recognizing a smaller percentage of members select a PPO plan) validates the continued use of the HMO plan design structures that are in place. President Follansbee asked are there any outliers in comparable baseline groups. Mike Clarke stated the public sector tends to have lower member contributions, and Fortune 500 employers tend to pass along a greater share of their health plan costs to employees via plan design and contribution cost-sharing.

Commissioner Hao asked if there are any long-term recommendations. Mike Clarke recommended continuing to focus and invest in HMO plans and structures and maintain the PPO plans for those members who may need more choice. Mike Clarke also noted an opportunity to evaluate into the future plan design provisions given the relatively low plan design out-of-pocket expense of \$493. Commissioner Hao asked to clarify the \$493 amount. Mike Clarke clarified the plan design out-of-pocket is the expected average amount that a member and family members pay for deductibles, co-payments, co-insurance, which is what becomes the member requirement through the cost-sharing elements of plan designs. Commissioner Zvanski thanked Mike Clarke for the cost and demographic presentation. Commissioner Zvanski also acknowledged how HMO and PPO plan designs offer options for members and expressed the goal to keep rates affordable and sustainable. Commissioner Canning thanked Mike and the Aon team for the informative report.

PUBLIC COMMENT: None

13. PRESENTATION OF SFHSS EXPRESS DASHBOARD: (Discussion) -postponed to May 13, 2021, Health Service Board Meeting

The SFHSS 2021 Express Dashboard is available on the SFHSS website at <https://bit.ly/3mUxwYI>
Presentation by Rin Coleridge, Enterprise Systems and Analytics Manager

PUBLIC COMMENT: None

14. PRESENTATION OF HEALTH PLAN RISK SCORES: (Discussion) -postponed to May 13, 2021, Health Service Board Meeting

The Health Plan Risk Scores are available on the SFHSS website at <https://bit.ly/2QsQ85C>
Presentation by Derrick Tsoi, SFHSS Senior Health Planner

PUBLIC COMMENT: None

15. REVIEW KAISER PERMANENTE HMO PLAN 2020 CLAIMS AND UTILIZATION EXPERIENCE: (Discussion)

The Kaiser Permanente HMO Plan 2020 Claims and Utilization Experience presentation is available on the SFHSS website at <https://bit.ly/3gfnYWL>

Mike Clarke, Aon presented the following items:

- Kaiser Permanente HMO Plan 2020 Experience-Introduction
- Kaiser Permanente HMO Plan 2020 Experience-Insights
 - Medical and Prescription Drug Claims
 - Top Diagnostic Categories for SFHSS Kaiser HMO Member Spend
 - Chronic Disease Prevalence, Active Employee and Early Retiree Groups
 - Chronic Disease Control, Active Employees, Early Retirees, Medicare Retirees
 - COVID-19 Direct Impacts, Active Employees, Early Retirees, Medicare Retirees
 - Preventive/Proactive Care Rates Across All Covered Groups
 - Top Pharmacy Cost Classes and Medication Adherence, Active Employee Group
 - Top Pharmacy Cost Classes and Medication Adherence, Early Retiree Group
 - Top Pharmacy Cost Classes and Medication Adherence, Medicare Retiree Group
 - Use of Telehealth, Active and Early Retiree Groups

President Follansbee understood hypertension could only be diagnosed in person and asked if people came into the office even during the pandemic, although Medicare allowed virtual visits during the pandemic. Kathi Elder, Kaiser Permanente, said the number represents members that came in person and said compared to other customers these numbers are really good even in light of COVID-19 metrics.

Commissioner Scott asked about the persistence and membership profile. Mike Clarke said the SFHSS member persistence is high as it tends to be 95% or more. Mike Clarke noted that more information will be shared during the Kaiser Permanente renewal package presentation at the May 13, 2021 Health Service Board meeting. Commissioner Zvanski mentioned adherence has been consistent and has persisted through the years and noted that Kaiser monitors member health needs very well.

PUBLIC COMMENT: None

REGULAR BOARD MEETING MATTERS

16. REPORTS AND UPDATES FROM CONTRACTED HEALTH PLAN REPRESENTATIVES:

(Discussion)

Debbie McCarthy, Kaiser Permanente-Debbie McCarthy provided an update on Kaiser Permanente's efforts to combat the violence and support for Asian and Pacific Islander communities and committed grant funding to two organizations that advocate nationally for Asian Americans, Native Hawaiian and Pacific Islander Communities, advancing justice and stop AAPI hate. Debbie McCarthy noted the grants are part of a broad commitment to improve health equity and address racism in communities they serve. President Follansbee asked if Kaiser Permanente still offers the Chinese Module where all providers, physicians, practitioners were Tri-lingual. Debbie McCarthy said the Chinese Modules are active especially in San Francisco. President Follansbee also asked how Kaiser can partner with HSS to incorporate language accessibility. Debbie said she is working with Jessica Shih, Communications Director and Carrie Beshears, Well-Being Manager, to provide and promote language modules to members. Commissioner Zvanski how many years are the grants sustained. Debbie McCarthy said the funding is a one-time grant to two different organizations.

Commissioner Scott requested Delta Dental to provide current data on member and provider surveys with the understanding that data will become part of the review in the future. Merriam Pabonan, Delta Dental, said she is working with Executive Director Yant and will provide data for review. Commissioner Breslin asked that HSS administer a survey. Executive Director Yant clarified that first HSS will review Delta Dentist standard customer satisfaction and provider surveys to inform any survey HSS may consider. Commissioner Breslin asked if Delta Dental allows new dentists to participate in both PPO and Premier. Merriam Pabonan said new dentists are allowed in both networks.

PUBLIC COMMENT: None.

President Follansbee noted agenda items 13 and 14 will be postponed to the May 13, 2021, Health Service Board meeting.

17. ADJOURNMENT: ~5:22 pm

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

Summary of Health Service Board Rules Regarding Public Comment

1. A member of the public has up to three (3) minutes to make pertinent public comments before action is taken on any agenda item.
2. A member may comment on any matter within the Board's jurisdiction as designated on the agenda.
3. 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 read aloud by the Board Secretary up to the three-minute maximum allotted to each commenter. 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.

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, 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.

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 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.