



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

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Abbie Yant, MA, RN
Executive Director
Health Service System

Holly Lopez
Executive Secretary

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HEALTH SERVICE BOARD

NOTICE AND REGULAR MEETING MINUTES **DRAFT**

Thursday, August 10, 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 August 10, 2023 (via [SFGovTV schedule](#))

Click the link to join the meeting – [August 10, 2023 HSB Regular Meeting WebEx link](#)

Public Comment Call-In: 415-655-0001 / Access Code: 2661 881 1477 Webinar Password: 1145

Listening to the meeting via phone

1. Dial into **415-655-0001** and then enter **access code** 2661 881 1477 then #
2. Enter Webinar Password: 1145 then press #
3. Press *3 to be added to the Public Comment queue and you will hear the prompt “You have raised your hand to ask a question, please wait to speak until the host calls on you.” When the system message says “Your line has been unmuted” - **THIS IS YOUR TIME TO SPEAK.**
4. You will be muted when your time to speak has expired.

Watching the meeting on WebEx

1. Join via hyperlink [August 10, 2023 HSB Regular Meeting WebEx Link](#)
2. **Click on the Raise Hand Icon** to be placed in the queue to speak. A raised hand will appear next to your name. When you are unmuted in the system, a request to unmute will appear on your screen, please select unmute to speak.
3. When you are unmuted in the system, a request to unmute will appear on your screen, please select unmute to speak. Once you hear me say “Welcome Caller,” you can begin speaking.
4. When your time has expired, you will be muted. Please click on the Raise Hand Icon to lower your hand.

Members of the public are encouraged to state their name clearly although you may remain anonymous. You will hear an audible warning when you have 30 seconds remaining. When your 3 minutes have ended, you will be placed back on mute.

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, August 9, 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.

The Health Service Board meeting recording is available on the [August 10, 2023, HSB Meeting webpage](#). Regular Board meeting recording archives are available on the [SFGovTV Health Service Board meeting webpage](#).

1. **CALL TO ORDER:** 1:03 pm

2. **ROLL CALL:**

President Randy Scott-Present
Vice President Mary Hao- Excused
Commissioner Karen Breslin-Present
Commissioner Chris Canning-Present
Supervisor Matt Dorsey-Excused
Commissioner Stephen Follansbee, M.D-Present
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: None

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

[See pdf of May 25, 2023, Health Service Board Special Meeting Minutes Approved](#)

[See pdf of June 8, 2023, Health Service Board Regular Meeting Minutes Approved](#)

Commissioner Breslin stated on May 25, 2023, she voted yes for the rates and benefits agenda action item six, “[Non-Medicare Blue Shield of California Flex-Funded HMO and United Healthcare Self-Funded EPO Medical/Rx Plans 2024 Rates and Contributions.](#)” Commissioner Breslin expressed her regret for voting yes to a plan that is likely unaffordable for early retirees with two or more dependents.

PUBLIC COMMENT:

Fred Sanchez, Protect Our Benefits: Expressed gratitude for Commissioner Breslin's statement and thanked her for her courage as an elected official with a fiduciary responsibility to reconsider her vote and its impact on early retiree members. He shared many early retirees and retirees are concerned about rate increases.

VOTE:

Aye: Breslin, Canning, Follansbee, Scott, Zvanski

Noes: None

ACTION: ACTION: The Health Service Board unanimously approved the May 25, 2023 Health Service Board Special Meeting Minutes and the June 8, 2023 Health Service Board Regular Meeting Minutes.

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

No written or verbal report this month.

PUBLIC COMMENT: None

6. BOARD PRESIDENT ASSIGNS COMMITTEE MEMBERS TO THE FINANCE AND BUDGET COMMITTEE/GOVERNANCE COMMITTEE FISCAL YEAR 2023-2024: (Action)
[See pdf of HSB President's Proposed 2023-2024 Standing Committee Assignments](#)

President Scott presented the Board Member Committee Assignments and affirmed each member's willingness to serve on the Committees. The following assignments were confirmed:

Governance Committee:

Mary Hao -Chair
Randy Scott-Member
Claire Zvanski-Member

Finance and Budget Committee:

Stephen Follansbee-Chair
Karen Breslin-Member
Chris Canning-Member

President Scott moved to approve the proposed Health Service Board Committee Assignments for 2022-2023. Commissioner Breslin seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Breslin, Canning, Follansbee, Scott, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved the Health Service Board Committee Assignments for 2023-2024.

7. DIRECTOR'S REPORT: (Discussion)
[See pdf of August 10, 2023, Director's Report](#)

Abbie Yant, SFHSS Executive Director presented the following items:

- Rates and Benefits Approved by the San Francisco Board of Supervisors
- Healthcare Affordability Board
- The Health Care Affordability Advisory Committee
- Board Education
- Annual Consideration for Vendor Competitive Bids
- University of California San Francisco Announcement
- John Muir Health to Acquire San Ramon Regional Medical Center
- UnitedHealthcare and UCSF Health Network Situation
- COVID Reporting
- USD Emergency Status Update
- Explore, Ratify, Approve, and Confirm Language
- Racial Equity, Diversity, and Inclusion Updates
- Administrative Updates
- Divisional Reports
 - Human Resources Personnel
 - Operations
 - Enterprise Systems and Analytics

- Member Services
 - Communications
- Finance and Budget
 - Contracts
- Well-Being

Executive Director Yant said hiring for Member Services is near completion and welcomed four new Member Services staff, Jason Hammack, and Robert Bito. Rayshone Bow, and Barry Yu. President Scott welcomed the new staff on behalf of the Board. President Scott expressed his appreciation for the new staff to spend this portion of their career in service to our members.

Executive Yant said SFHSS is in conversation with UCSF and UHC regarding a developing situation impacting Health Service System (HSS) Members who are enrolled in the UnitedHealthcare (UHC) Medicare Advantage PPO Medical Plan (MAPD) and receive care through the UCSF Medical Group. Although the UCSF Medical Group has been an Out-of-Network provider for our UHC MAPD plan, historically UCSF has been willing to see our members on an Out-of-Network basis. Of the six University of California (UC) medical systems, UCSF is the only UC provider not contracted with UHC as an in-network provider. Director Yant said that the University of California San Francisco Medical Group and United Healthcare have not agreed on a reimbursement rate. Executive Director Yant said our members are kind of stuck in the middle. SFHSS is pushing hard to get both parties to the table to get this resolved because it puts our members in a difficult position. Members with questions about their UHC coverage should call United Healthcare using the phone number on the back of their member benefit card. United Healthcare has indicated to SFHSS that they've trained their Customer Service Center to share SFHSS-specific information.

Commissioner Breslin asked if UCSF owns San Francisco General Hospital, Saint Mary's, and Saint Francis Acute Rehabilitation Center. Executive Director said UCSF is a health system and does not own San Francisco General Hospital. Commissioner Breslin asked if members have appointments at UCSF then physicians will see them. Executive Director Yant confirmed that this is occurring right now. Commissioner Follansbee said medical groups are separate entities from the hospital systems UCSF Medical Group can be different than every other medical group at any other UC hospital system and it's quite possible that the physicians at UCLA, at UC Davis, all have through their medical group have signed contracts with United Healthcare and it's simply the physician medical group at UCSF and not UCSF itself. Executive Director Yant said SFHSS is trying to get the attention of the network, medical group, and contracting team to express our concern. Commissioner Follansbee and Commissioner Canning asked if there is a direct date that UCSF Medical Group instructed doctors to stop providing medical services so SFHSS can monitor the disruption to members. Executive Director Yant said United Healthcare informed SFHSS that on June 30th, 2023 UCSF was prepared to configure their system to turn away new appointments but planned to see existing members through their cycles of treatment. SFHSS is asking for consistent communication from UCSF to our members and would appreciate the opportunity to work with UCSF to be sure they advise members accurately. Commissioner Zvanski asked if this is impacting any of the members in Tuolumne County. Executive Director Yant said members in Tuolumne County are referred to the University Hospital or hospitals in Modesto.

Commissioner Breslin asked if staff are coming into the office. Executive Director Yant said staff serve on a hybrid schedule. Members can call Members Services but there are no in-person appointments right now. Rey Guillen, SFHSS Chief Operating Officer, said phone issues are much resolved. The majority of calls this week were answered directly. Over the week we've averaged

between 10 and 4 voicemails per day, meaning that the call was not answered in minutes and rolled to voicemail. Member Services has received a few of voicemails and a reduced number of abandoned calls with the average length of time that the call is abandoned at six minutes which is much improved from where it used to be. Member Services is on track to successfully answer all member calls within a reasonable period and with the help of new staff we'll reach to period much sooner. Commissioner Follansbee asked if the phone system lets members know what the wait time is and give an option to call the member back. Rey Guillen said our system was updated in May of last year to the current version, and not only us but all other City Departments utilizing the system have experienced some technical challenges where we have not been able to implement some of those event features. Rey Guillen said SFHSS can investigate some of the more advanced system functions.

PUBLIC COMMENT:

Fred Sanchez, Retiree SFFD, Protect Our Benefits expressed concern for retirees who seek services at UCSF. He requested UCSF medical group and United Healthcare come to a reasonable accommodation for members to receive continuous care at least through the end of 2023.

Jeremiah Kattigan, Director of Local 798, San Francisco Firefighters, said members have received bills for care and letters instructing them to get another health plan. He appreciated SFHSS doing what they can to encourage UHC and UCSF to come to an agreement for the benefit of our members.

Dennis Kruger, Retiree SFFD, expressed the importance for firefighters both active and retired support the comments made today and highlighted that an agreement needs to be made especially if four out of five out of six UC medical groups have come to an agreement and UCSF is the only one that needs a contract.

Kim Lee, Retiree of City College of San Francisco, shared that primary care physicians are extremely difficult to find. She also said communication is not widespread and shared that UHC staff called her to set an appointment for a wellness check-up and it wasn't until the UHC searched for a primary care physician did they see that my UCSF physician isn't accepting UHC anymore.

Sharon Johnson, Retiree of the City and County of San Francisco, expressed gratitude for SFHSS in tending to the UHC and UCSF situation and emphasized the need for UHC and UCSF to negotiate an agreement.

Herb Weiner, Retiree of the City and County of San Francisco, expressed concern as a disturbed shareholder and beneficiary of United Health and requested UHC negotiate with UCSF for members to receive services.

WRITTEN PUBLIC COMMENT:

Larry Barsetti- Secretary for San Francisco Veteran Police Officers Association: Expressed concern that City and County San Francisco retirees may be at risk of having their request for medical services at the University Of California San Francisco Medical Group (UCSF) denied due to an ongoing contract dispute with United Health Care Insurance Co. (UHC). He urged the Health Service Board to use all influence they can upon the UCSF and UHC to quickly resolve their current impasse over Medicare Advantage contracts.

Timothy O'Brien, Secretary/Treasurer for the Retired Fire Fighters and Spouses Association Urged the Health Service Board to advocate for a fair resolution to this problem between UCSF and UHC. He expressed concern about the loss of medical treatment or a rise in the patient's cost for treatment.

Louis Voccia, CCSF Retiree, shared her concern about the risk of having member requests for medical services at the University of California San Francisco Medical Group (UCSF) denied due

to an ongoing contract dispute with United Health Care Insurance Co. (UHC). She requested the Health Service Board use all influence it can upon UCSF and UHC to quickly resolve their current impasse over Medicare Advantage contracts.

Linda B. Tabor-Beck: Urged the Health Service Board to do all they can to encourage both parties, UHC and UCSF to come to a resolution as soon as possible.

Robert Price, City College of San Francisco Retiree: Urged the Health Service Board to use all influence they can upon the UCSF and UHC to quickly resolve their current impasse over Medicare Advantage contracts.

Debra Wilensky, City College of San Francisco retiree: Urged the Health Service Board to use all influence they can upon the UCSF and UHC to quickly resolve their current impasse over Medicare Advantage contracts.

Lois H. Scott, Protect Our Benefits and the Retired Employees of the City and County of San Francisco, as well as the convenor of the Federation of Retired Union Members: Urged the Health Service Board to do whatever means are possible to support an equitable solution between UCSF and UHC.

Sharon Wilensky, Retiree: Urged the Health Service Board to use all influence they can upon the UCSF and UHC to quickly resolve their current impasse over Medicare Advantage contracts.

Denise Selleck, CCSF Retired Instructor: Urged the Health Service Board to use all influence they can upon the UCSF and UHC to quickly resolve their current impasse over Medicare Advantage contracts.

Ron Tsujimoto, Retired SFFD Captain: Urged the Health Service Board to use all influence they can upon the UCSF and UHC to quickly resolve their current impasse over Medicare Advantage contracts.

President Scott moved that the Health Service Board give its strong commendation and support to Executive Director Yant for her initiative and leadership to date in prompting discussions between United Health Care and the University of California San Francisco Health System. The Health Service Board directs Executive Director Yant to continue to insist that United Health Care and the University of California San Francisco Health System immediately undertake negotiations by convening meetings to exchange specific proposals that will lead to a working contractual relationship between the parties which will be of direct benefit to SFHSS Members. Further, the HSS Board Directs Executive Director Yant to work with USCF Medical Group to ascertain that accurate, sensitive, and timely information be provided to HSS members who are trying to schedule appointments with the UCSF Medical Group. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT:

Fred Sanchez, Retiree SFFD, Protect Our Benefits applauded the motion. He said he works closely with San Francisco Police Officer Alliance (SFPOA), The Grey Panthers, California Alliance for Retired Americans (CARA), and retired City Employees who are all in this together and far stronger when we all work together.

Kim Lee, Retiree City College of San Francisco, suggested that all retirees need to be notified so they know before going to any appointments.

President Scott emphasized the need for member communications on this situation. Executive Director Yant said SFHSS has draft language with United Healthcare that would either be sent out to a select audience or all members. Clear, accurate information is needed from UHC so members know what options are available rather than needing to call Member Services which is preparing for Open Enrollment.

8. **SFHSS FINANCIAL REPORT AS OF MAY 31, 2023: (Discussion)**

[See pdf of SFHSS Financial Reporting as of May 31, 2023 Memo](#)

[See pdf of SFHSS Financial Reporting as of May 31, 2023 Presentation](#)

Iftikhar Hussain, SFHSS Chief Financial Officer presented the following items:

- SFHSS Financial Report Highlights
 - Employee Benefit Trust Fund
 - Health Sustainability Fund
 - General Fund Administrative Budget

No discussion for this item.

PUBLIC COMMENT: None

BREAK: 2:17 pm -2:30 pm

ROLL CALL:

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

9. **BOARD EDUCATION: HEALTHCARE ECOSYSTEM AND MARKET OVERVIEW: (Discussion)**

[See pdf of Healthcare Overview Ecosystem Overview](#)

Mike Clarke, Aon, and Iftikhar Hussain, SFHSS Chief Financial Officer presented the following items:

- Background-Health Service Board Education Plan 2023
- Healthcare Ecosystem and Market Review Agenda and Background
- Health Service Board Modules, Today Through December
- U.S. Healthcare 101- Our Complex Ecosystem
- U.S Health System Complexity Drives Much Higher Spend Versus the Rest of the World
- Health Spending Inflation Has Long Exceeded General Inflation
- Healthcare Costs Increase Significantly as People Age
- The Government in the U.S. Healthcare Cost Structure
- Key Stakeholder Positions in our \$4Trillion U.S. Healthcare System
- Health System M&A Impacts
- SFHSS Strategic Focuses on Health Vendor Innovation
- SFHSS RFI/RFP Consideration Factors
- HSB's Role – Control Versus Influence
- Upcoming HSB Board Education Modules

President Scott recalled when the Gross Domestic Product (GDP) was 7%. Mike Clarke said healthcare is now 18% of the national Gross Domestic Product. Mike Clarke said 46% of 2021 U.S. healthcare spending—\$1.65 trillion—came through Medicare, Medicaid, and other Public Insurance programs such as CHIP (children's health insurance). Mike Clarke said Medicare covers those age 65-plus as well as qualified disabled Americans and those qualifying with end-stage renal disease, Medicaid and Children's Health Insurance Program cover Americans with primarily low income. He noted the percentage of healthcare spend from public sources has been

increasing over the course of time, which puts leveraged pressure on employer-sponsored healthcare spending to meet overall revenue goals by providers since Government sources tend to have lower reimbursements. Mike Clarke said Government Programs like Medicare and Medicaid dictate their reimbursement levels to hospitals and doctors. For providers to balance their revenue needs, higher prices need to be charged for private insurance patients to recoup their perceived shortfalls on what they're receiving from the Government.

Commissioner Follansbee pointed out that private equity firms and large retailers can see substantial revenue potential in developing digital and distribution solutions but wondered if there is any proof the solutions improve access to healthcare or improve individual health. Mike Clarke said Commissioner Follansbee's skepticism is appropriate. Mike Clarke said there's no question that in a private equity environment, the ultimate goal of these organizations is to drive revenue for the investors but doing so in a way that is trying to promote an idea, promote a concept that hopefully improves member health and lowers health plan trend lines for employers. But, Mike Clarke said a lot of it is largely unproven at this point. Organizations like Aon are trying to understand company by company, what the value and evidence of success the companies are delivering when they promise better member health status and outcomes.

Commissioner Zvanski asked if Blue Shield of California has a contract with the University of California San Francisco (UCSF). Mike Clarke said yes, the active employees and early retirees have UCSF access through those plans. Mike Clarke clarified that United Healthcare (UHC) and UCSF health network contract negotiations only impact Medicare Advantage plans. Iftikhar Hussain also said the negotiations do not affect the UHC Non-Medicare PPO split family covered lives.

President Scott commented on the Board's ability to control versus influence the total healthcare cost rates. President Scott said the Board does not have absolute control over the outcome of the negotiation in terms of premium rates. The Board can approve or disapprove of the rates after extensive negotiations but in terms of controlling what is provided to us from the health plans in terms of those rates, that's a back-and-forth that may or may not result in lower premiums. The Board can engage in very aggressive negotiations with our health plan partners or the Board can look at RFP as a way to try to impact total costs. SFHSS leadership and Aon actuaries conduct thorough analyses as well as negotiations with SFHSS health plans. Commissioner Zvanski agreed with President Scott, noting the Board has the authority to accept the rates presented to the Board as a result of the negotiations.

Commissioner Breslin asked which staff are on the negotiation team. President Scott said Executive Director Yant leads the team, and the team includes Iftikhar Hussain, SFHSS Chief Financial Officer; Rey Guillen, SFHSS Chief Operations Officer; Michael Visconti, Contracts Manager; Mike Clarke, Aon Actuary; and Anne Thompson, Aon Senior Account Executive and Lead Strategist. President Scott pointed out that Aon staff are responsible for looking into claims data, health plan trends, contracting issues, and making external and internal comparisons to develop recommendations in terms of trends regarding how health plans are operating. He said the process is a matter of trying to get the partners in continual conversations to know where rates are going. Commissioner Breslin said there also needs to be an alternative team to tell the plans when we are done negotiating. President Scott said that would be great in the abstract, but, we all know that making a health plan change is a major undertaking and not only because of the contracting but also the impact upon SFHSS members. So, it's not undertaken lightly but has to be done with some large and anticipated forethought whenever that would come to pass. Commissioner Follansbee said in his tenure the process has improved in terms of our ability to influence and control. SFHSS has made tremendous progress in our ability to influence and

control. The Board has a better understanding through our All-Claims database. The Board has opportunities to review and approve one of two options for plan features in terms of copays and new proposals for plans that increase the cost. The Board is asking for accountability for some of those decisions we've made in the past, like plan design features and the Board wants to know the impact.

Commissioner Follansbee recommended the Kaiser Family Foundation's (KFF) ongoing education programs that offer deep dives into issues the Board considers and related to the issues the Board has influence and control on healthcare costs. Mike Clarke also recommended the Foundation's daily alerts and the periodic articles which anyone can sign up to receive.

PUBLIC COMMENT: None

10. BOARD EDUCATION: HEALTHCARE TRANSITION FROM ACTIVE EMPLOYMENT TO EARLY RETIREE STATUS: (Discussion)

[See pdf of Healthcare Transition from Active Employment to Early Retiree Status](#)

Mike Clarke, Aon presented the following items:

- Healthcare Contribution Transition from Active Employment to Early Retiree Status
- Distribution of SFHSS Covered Active Employees, Retirees, and Dependents 2019-2023
- Healthcare Contribution Transition from Active Employment to Early Retiree Status
- Member Contributions – 2024 Monthly Amounts
- Active Employee City Contribution – Other Employers
- Early Retiree City Contribution – Based on City Charter and Early Retiree City Contributions Based on Three Formula Components
- Member Contribution Change Magnitude by Dependent Coverage Tier – Active Employment to Early Retiree Status
- City Contribution for Those Hired After January 9, 2009
- Total Employer and Member Contributions (2024 Monthly Amounts)
- Dental and Vision Plan Transitions
- Summary – Healthcare Transition Into Retirement
- SFHSS Resources for Members Transitioning to Retirement
- Appendix

Commissioner Breslin asked how the City Charter covers the difference in total plan cost between active employees and early retirees. (Presentation slides six through nine outline the contribution formulas). Mike Clarke said City Charter provides for the difference in total rate between the active employee only tier and early retiree only tier as part of the City contribution. There are three-member contribution tiers, 1. member plus one dependent, 2. member with 2 dependents, and 3. member plus 2 or more dependents. For the active employees who are City and County of San Francisco, there are two active employee MOUs, (93/93/83 and 100/96/83) which represent the percentage that the City is contributing towards the total cost of healthcare for each of those tiers for the active employees. (93/93/83 MOU = for an employee only, the City pays 93% and the employee pays 7%. For an employee with 1 dependent, the City pays 93% and the employee pays 7%. For an employee with 2 or more dependents, the City pays 83% and the employee pays 17%.)

Early retiree plans City contributions are based on City Charter language that describes three City Contribution formula components outlined in the Charter: 1. 10-County Survey Amount, 2. Actuarial Difference (which is the difference between the total cost rate for the Early Retiree Only

tier and the total cost rate for Active Employee Only tier for a given health plan), and 3. Prop. E Contributions. The 10-County Survey amount is determined by the annual survey and the same dollar amount for all plans and dependent tiers. The “Actuarial Difference” dollar amount is the same for all dependent coverage tiers for a given plan. The Retiree Prop. E Contribution also varies for each plan and is 50% times [total cost rate cost, less 10-County amount, less “Actuarial Difference”]—performed for both Retiree Only tier and Retiree + 1 tier (dollar amounts vary by plan; within a plan, there is an amount for Retiree Only tier and a second amount for RET+1 and RET+2+ tiers).

Mike Clarke said the Early Retiree Only member contributions are less in 2024 for Trio, Canopy Care, and Kaiser HMOs than for the Active Employee Only member contributions for these plans for employees with the 93/93/83 MOU. This is due to how the City Charter contribution formula determines City Contributions in the Early Retiree Only tier for these plans, relative to 7% of the Active Employee Only tier total cost rate for these plans for active employees.

Mike Clarke also noted the number of early retirees is 5,417 with 64% in the Retiree Only tier, 27% in the Retiree Plus One Dependent tier, and 9% in the Retiree Plus Two or More Dependents tier.

President Scott suggested communication plan for early retirees needs to include both the Health Service System and the Retirement System so active employees receive key information like the cost impact of healthcare from both departments as they approach retirement. Executive Director Yant said active employees have sticker shock of the cost impact in retirement and aren't prepared for the cost during early retirement. Executive Director Yant said the information needs to be shared in a variety of ways. Rey Guillen, COO, and Jessica Shih have built this into the communication plans for the last two years as well as building a [retirement cost calculator](#). Three agencies need to work together—Human Resources, Retirement System, and the Health Service System—to share information with employees. In addition, members need to hear healthcare retirement planning from their peers and their labor unions. Executive Director Yant said she is working with Fred Sanchez, Retired SFFD, to gather a list of stakeholders to have discussions about planning for healthcare costs in retirement. Commissioner Zvanski agreed that active employees may miss this information if they are not active in their unions or voluntarily seek pre-retirement seminars. Commissioner Zvanski applauded the Health Service System staff who attended the pre-retirement seminars and provide plan details.

PUBLIC COMMENT: None

11. ANNUAL CONSIDERATION OF SFHSS COMPETITIVE BIDS: (Discussion)

[See pdf of Annual Consideration of SFHH Competitive Bids](#) This item was called after agenda item sixteen

Michael Visconti presented the following items:

- Overview
- Routine Competitive Procurements
- Comparing RFIs and RFPs
- SFHSS RFP and RFI history and results (subject to market conditions)
- Possible RFI and RFP Timelines
- Considerations
- September 14, 2023, Health Service Board Meeting

Commissioner Breslin suggested competitive bids for early retirees and competition for Blue Shield of California. President Scott and Commissioner Zvanski suggested the Board be notified of the annual consideration beginning in June rather than August. Michael Visconti recalled the timeline for the Plan year 2022 Medical Plan Request for Approval and confirmed that in 2020, the Board was notified in June. Executive Director Yant said the Health Service System recognizes the Board's role in the competitive process and thus will give notice and present considerations to the Board annually between June and September.

PUBLIC COMMENT: None

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

Tiffany Gill, Blue Shield of California (BSC), Major Accounts Manager: Announced a groundbreaking collaboration between Blue Shield of California and Mahmee, aimed at providing SFHSS members with unparalleled maternal care and support throughout their journey from conception to their baby's first birthday. This collaboration reflects BSC's ongoing commitment to your members' health and well-being. With Mahmee by their side members gain access to an array of personalized resources which includes doulas and support ensuring a smoother and empowering experience during this remarkable chapter of a member's life. The comprehensive program will be at no additional cost through 2024 for SFHSS members.

Commissioner Follansbee applauded that the Mahmee program goes through the first year of the infant's life. Over half of the maternal mortality around pregnancy occurs after birth, so this program should help impact women who are at risk for a variety of reasons for death after they've given birth and hopefully improve the abysmal maternal mortality statistics nationwide. Commissioner Zvanski asked when the program will launch and how members learn about the program offer. Tiffany Gill said the program started August 1, 2023, and said emails were sent to staff and members who are of childbearing age. A paper mailing and a webinar will be available to members as well. Executive Director Yant said the maternal death rate among women of color, particularly African American women is horrifying which is why when the program was identified as an opportunity, SFHSS urged Blue Shield to California to launch quickly.

PUBLIC COMMENT: None

13. VOTE ON WHETHER TO HOLD CLOSED SESSION FOR MEMBER APPEAL (Action):

Commissioner Follansbee moved to hold a closed session for the member appeal. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Breslin, Canning, Follansbee, Scott, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved to hold a closed session for the member appeal.

Closed session under 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.

14. CLOSED SESSION FOR MEMBER APPEAL (Action):

Presented by President Scott

RECONVENE IN OPEN SESSION

15. VOTE TO ELECT WHETHER TO DISCLOSE ANY OR ALL DISCUSSION HELD IN CLOSED SESSION: (San Francisco Administrative Code Section 67.12(a)) (Action):

Commissioner Follansbee motioned not to disclose any or all discussions held in closed.

PUBLIC COMMENT: None

VOTE:

Aye: Breslin, Canning, Follansbee, Scott, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved not to disclose any or all discussions in closed session.

16. POSSIBLE REPORT ON ACTION TAKEN IN CLOSED SESSION (Government Code Section 54957.1 and San Francisco Administrative Code Section 67.12(b)) (Action):

Commissioner Follansbee moved to not report on possible action taken in closed session. Commissioner Breslin seconded the motion.

PUBLIC COMMENT: None

VOTE:

Aye: Breslin, Canning, Follansbee, Scott, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved not to report on any action taken in closed session.

17. ADJOURNMENT: 4:45 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. A member may comment on any matter within the Board's jurisdiction as designated on the agenda.
2. A member of the public has up to three (3) minutes to make pertinent public comments.
3. Public Comment can be given in person, remotely, or written.
4. 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.
5. 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 the [August 10, 2023 HSB Regular Meeting 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.