



# HEALTH SERVICE BOARD

## CITY & COUNTY OF SAN FRANCISCO

**Stephen Follansbee, M.D.**  
President

**Chris Canning**  
Vice President

**Karen Breslin**  
Commissioner

**Mary Hao**  
Commissioner

**Dean Preston**  
Supervisor (District 5)  
Commissioner

**Randy Scott**  
Commissioner

**Claire Zvanski**  
Commissioner

**Abbie Yant, MA, RN**  
Executive Director  
Health Service System

**Holly Lopez**  
Executive Secretary

**TEL (628) 652-4646**  
**FAX (628) 652-4703**  
<http://www.sfhss.org/>

### **HEALTH SERVICE BOARD**

### **MEETING MINUTES**

Thursday, February 11, 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 February 11, 2021 (via SFGovTV) - <https://sfgovtv.org/hsbLIVE>

**Click the link to join the meeting** - <https://bit.ly/31s8tmk>

**Public Comment Call-In:** 415-655-0001 / **Access Code:** 146 590 6694

#### Providing Public Comment:

1. Dial **415-655-0001** and then enter access code **146 590 6694** 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](mailto:health.service.board@sfgov.org), and **received by 5 pm on Wednesday, February 10th** 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: 1:05pm**

2. **ROLL CALL:**

President Stephen Follansbee, M.D.-Present-joined via phone at 1:40 pm  
Vice President Chris Canning-Present  
Commissioner Karen Breslin-Present  
Commissioner Mary Hao-Present  
Supervisor Dean Preston-Present  
Commissioner Randy Scott-Present  
Commissioner Claire Zvanski-Present

President Follansbee joined the meeting via telephone due to internet connection disruption and Vice President Canning conducted the meeting. Board Secretary, Holly Lopez shared that the Department of Technology confirmed a clear signal for internet bandwidth connection for the virtual platform.

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

The Health Service Board Regular Meeting Minutes from January 14, 2021, are available on the SFHSS website at <https://bit.ly/3ktlRyF>

Vice President Canning affirmed the Health Board meeting minutes set forth on January 14, 2021. Commissioner Zvanski moved to accept the Regular Health Service Board Regular Board meeting minutes as presented. Commissioner Scott seconded the motion.

PUBLIC COMMENT: None

**ACTION: The Health Service Board unanimously approved the Regular Board Meeting minutes as presented from January 14, 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

**FINANCE AND BUDGET COMMITTEE MATTERS**

The Committee Chair will give a brief update on matters discussed and/or recommendations made in this committee. The committee reviews all budgetary and financial issues that pertain to the San Francisco Health Services System (SFHSS). The committee’s goals align with the SFHSS Strategic goal – Affordable and Sustainable.

**5. APPROVAL OF SAN FRANCISCO HEALTH SERVICE SYSTEM FISCAL YEAR 2021-22 AND FISCAL YEAR 2022-2023 PROPOSED GENERAL FUND ADMINISTRATIVE BUDGET:**

**(Action)**

The San Francisco Health Service System Fiscal Year 2021-22 and Fiscal Year 2022-2023 Proposed General Fund Administration Budget Memo and Presentation are available on the SFHSS website at <https://bit.ly/3dz1VZT> and <https://bit.ly/2ZFslky>.

Committee Chair Breslin announced the Health Service Board Finance and Budget Committee approved the SFHSS Fiscal Year 2021-22 and Fiscal Year 2022-2023 proposed General Fund Administrative Budget on February 10, 2021. Commissioner Zvanski pointed out the proposed budget does not outline any layoffs or staff cutbacks. Executive Director Yant confirmed that the Mayor's instructions explicitly prohibited any layoffs and hopes the Mayor's office will restore funding for the Employee Assistance Program.

Commissioner Hao moved to accept the SFHSS Fiscal Year 2021-22 and Fiscal Year 2022-2023 General Fund Administrative Budget as presented. Vice President Canning seconded the motion.

PUBLIC COMMENT: None

**ACTION: The Health Service Board unanimously approved the San Francisco Health Service Board Fiscal Year 2021-2022 and Fiscal Year 2022-2023 General Fund Administration Budget as presented.**

**6. APPROVAL OF SAN FRANCISCO HEALTH SERVICE SYSTEM FISCAL YEAR 2021-22 AND FISCAL YEAR 2022-2023 PROPOSED HEALTHCARE SUSTAINABILITY FUND BUDGET:**

**(Action)**

The San Francisco Health Service System Fiscal Year 2021-22 and Fiscal Year 2022-2023 Proposed Budget Healthcare Sustainability Fund Budget Memo and Presentation are available on the SFHSS website at <https://bit.ly/3saNWgW> and <https://bit.ly/3qK5ikz>

Commissioner Zvanski moved to accept the San Francisco Health Service System Fiscal Year 2021-22 and Fiscal Year 2022-2023 Proposed Budget Healthcare Sustainability Fund Budget as presented. Commissioner Scott seconded the motion.

PUBLIC COMMENT: None

**ACTION: The Health Service Board unanimously approved the San Francisco Health Service Board Fiscal Year 2021-2022 and Fiscal Year 2022-2023 Healthcare Sustainability Fund Budget as presented.**

**REGULAR BOARD MEETING MATTERS**

**7. APPROVE THE FOLLOWING SFHSS STAFF RECOMMENDATION FOR THE MEDICAL PLAN OFFERINGS IN PLAN YEAR 2022 (Non-Medicare): THE ADDITION OF HEALTH NET CANOPY HMO (FLEX FUNDED) AND BLUE SHIELD OF CALIFORNIA (BSC) PPO WITH ACCOLADE (SELF-FUNDED); CONTINUE WITH BSC ACCESS+ AND TRIO PLANS FOR PLAN YEAR 2022; DISCONTINUE THE UNITEDHEALTHCARE PPO PLAN: (Action)**

The SFHSS Staff Recommendation for the Medical Plan Offerings in Plan Year 2022 (Non-Medicare): the selection of Health Net Canopy HMO (Flex Funded) and BlueShield of California (BSC) PPO with Accolade (Self-Funded); Retain BSC Access+ and Trio Plans for Plan Year 2022; Discontinue the United Healthcare PPO Plan Results and Recommendation document and Presentation are available on the SFHSS website at <https://bit.ly/3dDi2FG> and <https://bit.ly/3kbqaPb>.

Executive Director Yant, Michael Visconti (SFHSS Contracts Manager), and Mike Clarke and Anne Thompson (Aon), presented the following items in the SFHSS Staff Recommendation for the Medical Plan Offerings in Plan year 2022 (Non-Medicare):

- Recommendation for Health Plan Offerings
- Health Plan Offerings for Plan Year 2022
- Health Plan Offerings for Plan Year 2022-System Competition Model
- Forecasted Savings from RFP
- Medicare Retirees
- Request for Proposal (RFP) Objectives and Accomplishments
- Panel Selection and Scoring Rubric
- Plans Selected and Retained: BSC Trio HMO
- Plans Selected and Retained: BSC Access+ HMO
- Plans Selected and Retained: Health Net Canopy HMO
- Plans Selected and Retained: BSC Blue Card Network with Accolade PPO
- Plans Selected and Retained: Member Impact for UHC PPO Members Transitioning to BSC PPO
- Plans Not Selected: PPO
- Plans Not Selected: HMO
- Future Objectives and Unrealized RFP Opportunities
- Provider Gaps
- Further Information for Hetch Hetchy Area Members
- Pathway to Addressing Provider Gaps
- Recommendation for Health Service Board

Executive Director Yant acknowledged Michael Visconti's efforts and contributions to complete this process and thanked him for guiding the team. Executive Director Yant also thanked Mike Clarke and Anne Thompson for tremendous partners in the process.

Executive Director Yant announced the request for proposal results included two recommendations: 1. change the PPO City Plan administrator from UnitedHealthcare to Blue Shield of California and 2. add Health Net Canopy HMO and add Blue Shield of California PPO with Accolade.

Anne Thompson, Aon, reviewed the System Competition Model with the new plan offerings and noted that the 3 HMOs-Health Net Canopy, Blue Shield Trio, and Blue Shield Access+ all have the same plan design and copays, coinsurance, drug costs, deductibles, and coinsurance design would all match. Mike Clarke, Aon, explained the new plan offerings project \$16 million savings for the three years, generated by a reduction in administrative fees and an increase in prescription drug rebate cost-share percentage flowing to SFHSS in 2022. Mike Clarke noted the \$16 million

total savings is projected to distribute \$14 million to employers and \$2 million to active and early retirees. Michael Visconti, Contracts Manager, reviewed the RFP accomplishments, objectives, panel selection, and scoring rubric. Michael Visconti pointed out that SFHSS staff carefully vetted, assembled, and convened a panel of six experts who assessed and scored the responses to the RFP questionnaire, the calculated disruption, and reviewed the relative financial strength for the three-year plan years. Michael Visconti noted the respondents were evaluated across six categories: questionnaire, financial, non-financial, oral interviews, alignment with SFHSS, and Member needs and disruption. Anne Thompson stated that the plans with the top scores were selected for the recommendation and scored as followed: (the top score is 1500)

- Blue Shield of California Trio HMO (1270.71 fully funded/ 1250.71 flex funded)
- Blue Shield of California Access+ (1258.84 flex funded/ 1237.34 fully funded)
- Health Net Canopy HMO (1234.26 flex funded)
- Blue Shield of California Blue Card Network with Accolade PPO (1245.64 self-funded)

Anne Thompson noted that SFHSS will strategize and support members who transition from UHC administrator to the Blue Shield of California Blue Card Network with Accolade PPO administrator. Anne Thompson identified that although Sutter physicians and facilities are prominent within BSC Access+ Network only a limited set of Sutter Facilities are in-network. Anne Thompson then outlined how SFHSS will address the gaps: 1. work with partners at BSC to expand Provider Group options, including Sutter Health under the Trio HMO plan, 2. evaluate any possible instances of projected provider disruption for active employees and early retirees in the Hetch Hetchy area, and 3. uncover member reasons for choosing Access+ to determine the best way to meet their needs during possible plan migration.

Michael Visconti noted SFHSS received a protest and after an official review, there is no indication that the protest has any merit and SFHSS is working with the City Attorney to prepare a formal response. Vice President Canning asked when the RFP protest period ended. Executive Director Yant stated the protest period ended on Friday, February 5, 2021.

Commissioner Scott asked how the scoring rubric and points were derived. Michael Visconti stated the scoring rubric and point values were derived from prior RFP standards, industry best practices, and extensive consultation with Aon actuarial staff. Michael Visconti also said the goal was a balanced approach given that SFHSS was not looking for a cost proposal but rather a balance between high value and beneficial sustainable costs.

Commissioner Scott asked if customer service was one of the non-financial scoring rubric categories. Michael Visconti stated there were extensive underlying scope elements regarding service to members. Commissioner Scott recommended when introducing the new plans to summarize the customer service dimensions such as telephone access to providers, call wait times, responsiveness to member needs be included in the plan highlights so members understand the member plan. Executive Director Yant reassured the Board that nothing in the RFP process changed the operational standards, regarding call times, transitions, drug plans are operational areas that staff attends to regularly will not change.

Commissioner Zvanski also wanted to know if the Chinese Hospital was in-network for the new plans. Executive Director Yant confirmed the Chinese Hospital is available through BSC Access+.

President Follansbee commented there is a major advantage to expand HMO offerings and found value in the competition model. President Follansbee supported the addition of the BSC with Accolade because it offers the improvement of services such as 24-7 access to healthcare workers and nurses and coordination of services that help members receive the care and medications they need in a timely manner. President Follansbee also noted Canopy's network is expanding which will also offer more choice to members, especially with the addition of Marin General and Zuckerberg General Hospital.

Vice President Canning and Commissioner Zvanski asked what efforts will be made to connect with members with the UHC PPO, members in the Hetch Hetchy area, and members out of state, particularly with any pharmaceutical or formulary needs. Executive Director Yant shared 2,500-3,000 members participate in the UHC plan and although it's expensive insurance, the plan offers choice for their needs, however, the small number of members in the PPO allows for targeted outreach and communication plans include the internal marketing team partner with Blue Shield of California to connect with members. Executive Director Yant explained that formulary changes happen throughout the year and SFHSS works to evaluate those changes and who they impact directly. Executive Director Yant also noted that administrative fees and costs are outlined in the memorandums of understanding (MOU) for the active employees and early retiree premium costs paid by their employer, outlined in the City Charter which SFHSS cannot change.

Commissioner Breslin said she did not see how Health Net Canopy HMO is a competitor to Blue Shield of California. Commissioner Breslin also expressed concern that the cost for actives and early retirees will increase particularly for members with families and dependents. Mike Clarke explained due to The City Charter contribution formulas the employer contributions for retirees are limited for the first dependent only so the full cost increment and rate between the retiree plus one and retiree plus 2 or more coverage goes to the early retiree to fully pay as part of their retiree contribution. Mike Clarke shared there are approximately 800 early retirees in the PPO plan—approximately 600 are in the retiree-only coverage, with approximately 200 retirees in the PPO covering dependents (most early retirees cover one dependent and 34 early retirees cover 2 or more dependents). Mike Clarke also shared there are 5,300 early retiree members total, approximately 1,800 of which cover a dependent (1,341 cover one dependent, 435 cover 2 or more dependents). Commissioner Zvanski asked if the City Charter limitations are calculated into the new plan rates. Mike Clarke referred to the May 28, 2020 Rates and Benefits presentations ([Kaiser](#), [BSC](#), and [UHC](#)) in which the rate cards start with the development of total cost rates and then build in the elements of the City Charter contributions for early retirees.

Commissioner Scott asked if there is a multi-year premium guarantee from any of the plans. Mike Clarke said there is no premium guarantee for a flex funded or self-funded plan, but there is a multi-year guarantee on administrative fees and the capitation rates have been quoted at certain levels. Mike Clarke said the PPO plan fees will remain constant for the plan year 2022 into 2023 and 2024. Mike Clarke shared Accolade administrative fees ensure the first year there is a 2 to 1 guarantee and that will increase to 3 to 1 by the end of 2024 and if claim costs exceed certain levels, certain per employee per month levels in '22, '23, or '24 then there is a provision for a penalty of a portion of administrative fee costs should that occur.

Commissioner Zvanski recalled the option for the Board to interview RFP respondents and wondered if that was still available. Governance Committee Chair Scott noted the [November 5](#),

[2020, Governance Committee meeting minutes](#) and reminded the Board that the option to interview RFP respondents was not adopted. Erik Rapoport, City Attorney, confirmed that the Governance Committee delegated the decision for SFHSS staff to review proposals, conduct oral interviews, and assign scoring rubric and final scores. Erik Rapoport noted the RFP final scores were included in Appendix A of the RFP Results and Recommendation document. Supervisor Preston shared his experience working on the Board of Supervisor Government Audit and Oversight Committee, and pressed upon the importance of the separation of the Commission from the RFP and that Commissioners may have an opportunity to craft the RFP and then ultimately vote on the staff recommendation. Supervisor Preston stated it is essential the Board does not participate in interviews with potential vendors, not to keep Commissioner in the dark but to prevent misconduct or interference in the RFP process.

Commissioner Zvanski expressed concern that she may not have all the information to make an informed decision. Vice President Canning asked Executive Director Yant if all publicly disclosed RFP materials had been posted and distributed. Executive Director Yant confirmed materials are available on our website and were sent to the Board. Commissioner Hao commented the information provided to the Board offered a thorough analysis, provided the scoring criteria, and felt confident the SFHSS conducted due diligence.

Commissioner Breslin mentioned an email to the Board from the Fire Fighters Local 798 Union. Executive Director Yant confirmed the email and spoke with Sean Burford, President Fire Fighters Local 798. Executive Director Yant shared Sean Burford's requested for more information on the transference of the PPO City Plan administrator from UHC to BSC and requested continued conversations to support his members in understanding the financial impact on the current structure on early retirees given the City Charter outlines.

Commissioner Scott asked Erik Rapoport to comment on the fiduciary liability. Erik Rapoport said one of the key aspects of a fiduciary is to rely on experts and retain experts so the Board feels comfortable with the information gathered and the Staff recommendations. Erik Rapoport also stated the RFP process has been followed exactly as outlined to the Board, beginning with the Board drafting the RFP with the help of experts from both Aon and SFHSS staff. The process received several legal reviews to ensure the RFP, created an even playing field, and HSs treated all of the respondents equally, and panelists scored the respondents equally, and everyone was given the same results and reports to review. Erik Rapoport also stated that panelists' names are kept confidential to prevent lobbying during the RFP process. Commissioner Breslin requested to see a list of panelists. Commissioner Breslin also said the Board had received an email from Catherine Dodd, former SFHSS Executive Director, advocating for Blue Shield of California, and asked her fellow Commissioner if they have been lobbied during the RFP process. Commissioners said they had not been lobbied during this process. Erik Rapoport said the panel member names can now be disclosed upon request as a matter of public record.

Commissioner Scott moved to accept the recommendation of the SFHSS staff for the addition of Health Net Canopy HMO flex funded and Blue Shield of California PPO with Accolade self-funded, continue with Blue Shield of California Access+ and Trio plans for plan year 2022, and discontinue the United Health Plan PPO Plan. Commissioner Mary Hao seconded the motion.

**PUBLIC COMMENT:**

Emily Wallace, Union representative for ISPPE, Local 21 acknowledged the Board's commitment to serving members and providing equitable access to quality Healthcare. Emily Wallace expressed the need for strong and detailed contingency plans to address any provider gaps and explore what potential disruptions would mean for our Hetch Hetchy members.

Member, Fred Sanchez from Protect Our Benefits, requested clarity of known triggers in the plan agreements that would allow plans to increase the submitted rates.

**ACTION:** The Health Service Board approved the SFHSS Staff recommendation for the selection of Health Net Canopy HMO flex funded and Blue Shield of California PPO with Accolade self-funded, retention of Blue Shield of California Access+ and Trio plans for plan year 2022 and discontinue the United Health Plan PPO Plan.

**Ayes:** 5-Follansbee, Canning, Hao, Supervisor Preston, Scott

**Nays:** 2-Breslin, Zvanski

**8. PRESIDENT'S REPORT: (Discussion) This item was tabled.**

Report given by President Follansbee

**9. DIRECTOR'S REPORT: (Discussion) This item was tabled.**

The January 14, 2020 Director's Report can be located on the SFHSS website at

<https://bit.ly/2MHHoXV>

**10. HSS FINANCIAL REPORTING AS OF DECEMBER 31, 2020: (Discussion) This item was tabled.**

The HSS Financial Reporting of December 31, 2020 and presentation can be located on the SFHSS website at <https://bit.ly/2MJvjSd> and <https://bit.ly/2NQAoJ7>

**RATES AND BENEFITS MATTERS**

**11. PRESENTATION ON THE 2021 RATES AND BENEFITS CALENDAR FOR THE PLAN YEAR 2022 (Discussion) This item was tabled and Executive Director Yant announced there will be no need for the February 25, 2021 calendar hold since all agenda actions items were concluded today.**

Presented by Abbie Yant, Executive Director

DOCUMENTS ATTACHED: 2021 Rates and Benefits Meeting Calendar Schedule for Plan Year 2022

## GOVERNANCE COMMITTEE MATTERS

The Committee Chair will give a brief update on matters discussed and/or recommendations made in this committee. The items presented in the governance meetings ensure that the Commission is following the Governance guidelines and processes that are required by the Health Service Broad Governance Policies.

### **12. APPROVAL OF 2020 HEALTH SERVICE BOARD EDUCATION REPORT: (Action)-** → This item was called **after item 6.**

The 2020 Health Service Board Education Report is available the SFHSS website at <https://bit.ly/37RudLD>.

Committee Chair Scott presented the HSB Education Report to the Board. Chair Scott noted that the following key topics will be:

- Topics Ranked in order highest to lowest
  - 1<sup>st</sup>-Mental Health Stigma
  - 2<sup>nd</sup>-Culturally Competent Care
  - 3<sup>rd</sup>-Opioid Updated including Medication-Assisted Treatment
  - 4<sup>th</sup>-Pharmacy High-Cost Drugs/Genomics
  - 5<sup>th</sup>-Dental Quality Care/Medicare Quality Measurements
- Additional Requests from Survey Responses
  - Fiduciary Duties
  - Social Determinants of Health (SDoH)
  - Health Plan Transparency Costs

Chair Scott noted the educational sessions will be conducted for the Board during meetings as well as other events throughout the year, taking a particular note for scheduling around the Rates and Benefits cycle.

Commissioner Zvanski asked if training sessions been scheduled. Chair Scott said the calendar has not been set but anticipates that the topics will be presented at regular Board meetings or set for special meetings throughout the year. Commissioner Zvanski commented that it's good to have training sessions at regular Board meetings so members can understand the Board's processes and decisions. Chair Scott also noted all Commissioner are members of the International Foundation for Employee Benefits and can use their resources throughout the year as well.

Commissioner Hao moved to accept the 2020 Health Service Board Education report. Commissioner Zvanski seconded the motion.

DOCUMENTS ATTACHED: 2020 Board Education Report

PUBLIC COMMENT: Member, Fred Sanchez, noted there was a discrepancy between the posted agenda and the agenda displayed on the screen.

**ACTION: The Health Service Board unanimously approved the 2020 Health Service Board Education Report.**

**13. APPROVAL OF THE 2020 ANNUAL HEALTH SERVICE BOARD SELF-EVALUATION REPORT: (Action)**

The 2020 Annual Health Service Board Self-Evaluation Report and presentation are available on the SFHSS website at <https://bit.ly/3aUpw5w> and <https://bit.ly/3pSocV2>.

Board Secretary, Holly Lopez presented the following items in the Annual Self-Evaluation FY 2019-2020 Report:

- The Process and Self-Evaluation Areas
- Executive Summary Highlights
- Improvement Areas of Concern & Focus Highlighted in the 2019-2020 Evaluation
- Score Decreases
- Governance Committee Planning and Next Steps for Areas of Improvement
- Governance Committee Suggested Areas for Improvement
- Conclusion

The Board thanked Holly Lopez for the administrative support and commended her diligence, thoroughness, and professionalism in completing this task. Board Secretary, Holly Lopez thanked the Board for the opportunity to work on the report and support the evaluation process. Holly Lopez also thanked Julia Ma, Director of Workforce Development for her consulting services throughout the process. Commissioner Hao expressed her gratitude to her fellow Board members for the feedback as the Board continually seeks to improve to serve the City and its members.

Holly Lopez noted the average score shift was driven by a significant number of “Strongly Disagree” responses by one respondent and upon closer look at the comments this respondent did not make any suggestions, express any confusion or rationale to the disagreement, in fact, the respondent only offered positive comments. Holly Lopez suggested this may have been an error in the respondent’s marking to the questions. Chair Scott stated the Governance Committee concluded the respondent may have made an error in their markings because the respondent marked all the questions strongly disagree but in the comments area there were favorable comments.

Commissioner Zvanski moved to accept the 2020 Annual Health Service Board Self-Evaluation as presented. Commissioner Breslin seconded the motion.

PUBLIC COMMENT: None

**ACTION: The Health Service Board unanimously approved the 2020 Health Service Board Self-Evaluation Report.**

**REGULAR BOARD MEETING MATTERS**

**14. REPORTS AND UPDATES FROM CONTRACTED HEALTH PLAN REPRESENTATIVES: (Discussion) This item was tabled.**

## PUBLIC COMMENT:

### 15. **ADJOURNMENT:** ~4:15pm

**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](mailto: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](mailto:holly.lopez@sfgov.org). The following email has been established to contact all members of the Health Service Board: [health.service.board@sfgov.org](mailto: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](http://www.sfgov.org/ethics).