



HEALTH SERVICE BOARD
CITY & COUNTY OF SAN FRANCISCO

Mary Hao
President

Claire Zvanski
Vice President

Jack Cremen
Commissioner

Supervisor Matt Dorsey
District 6
Commissioner

Art Howard
Commissioner

Gregg Sass
Commissioner

Fiona Wilson, MD
Commissioner

Abbie Yant, MA, RN
Executive Director
Health Service System

Holly Lopez
Executive Secretary

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

HEALTH SERVICE BOARD

REGULAR MEETING MINUTES DRAFT

Thursday, February 13, 2025, 1:00 p.m.
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 the general public to comment at the beginning of the meeting and on each discussion or action item on the agenda. Each comment is limited to 3 minutes, and the Chair may, at their discretion, limit public comment to less than 3 minutes per member of the public. 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. Remote viewing may not be available due to technology outages.

Watch at 1:00 p.m. on February 13, 2025 (via [SFGovTV schedule](#))

Click the link to join the meeting – [February 13, 2025 HSB Regular Meeting WebEx link](#)

Public Comment Call-In: 415-655-0001 / Access Code: 2662 056 9486 Webinar Password: 1145

Listening to the meeting via phone

1. Dial into **415-655-0001** and then enter **access code** 2662 056 9486#, then # again
2. Press *3 to enter 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.**
3. You will be muted when your time to speak has expired.

Watching the meeting on WebEx

1. Join via hyperlink [February 13, 2025 HSB Regular Meeting WebEx link](#)
2. Webinar Password: 1145
3. **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.
4. 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.
5. 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 p.m. on Wednesday, February 12, 2025**, 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, and the Board Secretary will note on the record during the specific agenda item that the Board received written public comment on that item and will include that note in the meeting minutes. In the body of your email, indicate the meeting date and the particular agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

1145 MARKET STREET 3RD FLOOR, SAN FRANCISCO, CA 94103

1. **CALL TO ORDER:** 1:03 p.m.

2. **ROLL CALL:**

President Mary Hao- Present
Vice President, Claire Zvanski- Present
Commissioner John Cremen- Present
Supervisor Matt Dorsey- Present
Commissioner Art Howard- Present
Commissioner Gregg Sass- Present
Commissioner Fiona Wilson, MD.- Present

3. **GENERAL PUBLIC COMMENT - This is 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:

Lois Scott, Vice President Protect Our Benefits: Questioned the reliance on AI over human support and the accountability of subcontractors. They expressed concerns about the future of Medicare and Medicare Advantage, citing high costs and growing dissatisfaction.

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

[See pdf of January 9, 2025, Health Service Board Regular Meeting Minutes Approved](#)

Vice President Zvanski moved to approve the January 9, 2025, Health Service Board Regular Meeting Minutes. Commissioner Wilson seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Dorsey, Sass, Wilson, and Zvanski Noes: None

ACTION: The Health Service Board unanimously approved the January 9, 2025, Health Service Board Regular Meeting Minutes.

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

President Hao expressed regret losing for Executive Director Yant. President Hao expressed anticipation for the recruitment process and mentioned an agenda item today that will provide an update on efforts to find a new executive recruiter.

PUBLIC COMMENT: None

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

[See pdf of February 13, 2025, Director's Report](#)

Abbie Yant, SFHSS Executive Director presented the following items:

- Plan Year 2026 Life/Disability Request for Proposal RFP Update
- Black-Out Notice Continues
- San Francisco Unified School District Update
- Health Service Board 2025 Election

- Racial Equity, Diversity, and Cultural Heritage Celebrations
- Healthcare Affordability Board and Advisory Committee
- Divisional Report
 - Human Resources Personnel
 - Operations
 - Enterprise Systems and Analytics
 - Member Services
 - Communications
 - Finance and Budget
 - Contracts
 - Well-Being

No questions or discussion from the Board.

PUBLIC COMMENT: None

7. SFHSS FINANCIAL REPORT AS OF DECEMBER 31, 2024: (Discussion)

[See pdf of the SFHSS Financial Report as of December 31, 2024, memo](#)

[See pdf of the SFHSS Financial Report as of December 31, 2024 presentation](#)

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

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

President Hao asked if the increase in claims was due to the time of year, specifically the last six months of the calendar year, or if it was a broader trend linked to the ongoing effects of the pandemic. Iftikhar Hussain responded that there had been a general increase in utilization starting in October, which was expected to continue through December.

Commissioner Sass commented that flu cases were currently more prevalent than COVID, leading to full hospital emergencies, difficulties in accessing care, and increased hospital admissions. They suggested that seasonal health changes could impact claims processing despite some lag. Iftikhar Hussain responded that they were analyzing claim expenditures and meeting with Blue Shield twice a year to review trends. He noted that while their current data was slightly outdated, they had observed pharmacy cost increases and expected the next report to reflect the flu's impact.

PUBLIC COMMENT: None

FINANCE AND BUDGET COMMITTEE MATTERS

8. APPROVAL OF SAN FRANCISCO HEALTH SERVICE SYSTEM GENERAL FUND ADMINISTRATIVE BUDGET FOR FISCAL YEAR END 2026 AND FISCAL YEAR END 2027:(Action)

[See pdf of Proposed SFHSS General Fund Administration Budget FYE 2026 and FYE 2027 Presentation](#)

The proposed budget presentation included:

- Background and Board Action
- HSS Budgets
- General Fund Budget Highlights
- General Fund Budget Adjustments
- GF Budget FTEs by Division
- General Fund Budget
- Recommendation to the HSB

Committee Chair Sass provided an overview of the Committee meeting held earlier that morning. He stated that the Committee received full presentations on the Health Service System General Fund budget, which goes to the Mayor's office, and the Health Service System Healthcare Sustainability Budget, which does not. He emphasized the Commission's responsibility to ensure adequate funding for the Healthcare Stability Fund. Commissioner Wilson participated actively, asking many questions. The Committee recommended approval of both budgets.

President Hao noted that the General Fund budget reflected a reduction in full-time equivalents (FTEs), not just a hiring freeze. Iftikhar Hussain confirmed the reduction and explained that while budgeted FTEs were higher, vacancies remained. Of ten current vacancies, six were set to be filled, while four were eliminated to meet the Mayor's cost reduction goal. Due to a hiring freeze, exceptions were required for new hires, and the request for six positions was under review. He acknowledged that vacancies impacted service levels, particularly during peak call volumes, but noted that an outside call center and the Blue Shield's call center helped mitigate the issue.

Vice President Zvanski asked whether there was any update on the approval process for filling the six vacancies and how it would proceed. Iftikhar Hussain responded that they had completed the necessary paperwork and discussed the issue with the Mayor's Budget Office, and emphasized the service impact of the vacancies. Iftikhar Hussain expressed optimism that the exceptions would be approved.

Commissioner Sass moved to approve the SFHSS General Fund Administration Budget for Fiscal Year End 2026 and Fiscal Year End 2027. Vice President Zvanski seconded the motion.

PUBLIC COMMENT: None.

VOTE: Ayes: Cremen, Hao, Howard, Dorsey, Sass, Wilson, and Zvanski Noes: None

ACTION: The Health Service Board unanimously approved the SFHSS General Fund Administration Budget for Fiscal Year End 2026 and Fiscal Year End 2027.

9. APPROVAL OF SAN FRANCISCO HEALTH SERVICE SYSTEM HEALTHCARE SUSTAINABILITY BUDGET FOR FISCAL YEAR END 2025-2026 AND FISCAL YEAR 2026-2027:(Action)

[See the pdf of the Proposed SFHSS Healthcare Sustainability Fund Budget FYE 2027 and FYE 2027](#)

The proposed budget presentation included:

- Background and Board Action
- HSS Budgets
- HSF Budget Highlights
- HSF Budget by Division and Projects
- HSF Budget FTEs by Division
- HSF Budget and 5 Year Forecast
- Recommendation to the HSB

Commissioner Sass asked for clarification on the increase to the sustainability budget included in the motion. Iftikhar Hussain confirmed that the increase would be from \$4 to \$6 per month. Commissioner Sass noted that a five-year projection indicated the necessity of this \$2 increase to maintain a stable fund balance. Without it, stability could not be maintained. Iftikhar Hussain agreed, confirming the need for the increase. President Hao asked if the change would take effect in plan year 2026, to which Iftikhar Hussain confirmed that it would. Vice President Zvanski asked whether five years was a reasonable expectation for budget stability. Iftikhar Hussain said that their five-year forecast provided a good estimate, allowing for one-time projects and necessary infrastructure improvements to enhance service and improve efficiency. He acknowledged that projections become less certain further into the future but emphasized that the PMPM charge was set to ensure solvency for the known financial needs over the next five years.

Commissioner Wilson noted that well-being activities, previously part of the General Fund, would now be moved into the Health Services Fund. Iftikhar Hussain confirmed that this transition began in the current fiscal year. President Hao asked if the change was already in effect, and Iftikhar Hussain affirmed that it was.

Committee Chair Sass moved to approve the SFHSS Healthcare Sustainability Fund Budget for Fiscal Year End 2026 and Fiscal Year End 2027. Vice President Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Dorsey, Sass, Wilson, and Zvanski Noes: None

ACTION: The Health Service Board unanimously approved the SFHSS Healthcare Sustainability Fund Budget for Fiscal Year End 2026 and Fiscal Year End 2027.

RATES AND BENEFITS

10. PRESENTATION OF THE RATES AND BENEFITS CALENDAR FOR THE PLAN YEAR 2026: (Discussion)

[See pdf of the SFHSS Rates and benefits Calendar for the Plan Year 2026](#)

Director Yant informed the Commissioners that there were no changes to the rates and benefits calendar posted on the website. Director Yant emphasized the importance of reserving the fourth Thursday of the month for the next several months noting that it would be released if not needed. She urged Commissioners to prioritize this hold in their schedules to accommodate the Executive Director selection process.

PUBLIC COMMENT: None

11. BOARD EDUCATION: HEALTHCARE COST TREND INFLUENCERS UPDATE: (Discussion)

[See pdf of the Board Education: Healthcare Cost Trend Influencers Update](#)

Presented by Mike Clarke, Aon – Lead Actuary presented the following items:

- Escalated Medical Trend Continues
- 2025 Average Employer Budgeted Cost Increases (Aon Clients)
- Updated Trend Experience Through 2024
- Service Pricing Influences Are Magnifying for Large Claims
- Population Health Risk Impacts—Spend Distribution
- Population Health Risk Impacts—Spend by Age and Health Status
- Behavioral Health Needs Continue to Escalate— As Access Concerns Also Continue
- Escalated Pharmacy Trend Drivers Continue—With One Glimmer of Good News
- Aon’s Perspective on the Pharmacy Market (From November 2024 Board Education)
- Pharmacy Cost Trend Drivers
- Aon Clients GLP-1 Experience, 2021-Q1 to 2024-Q3
- Healthcare Cost Trend Influencers – Projected Impact on 2026 SFHSS Medical/Rx Plan Rates
- Next Steps to Determine SFHSS Medical/Rx Plan Rates and Contributions for 2026 Plan Year

President Hao asked Mike Clarke for his professional opinion on how the Board could maintain high-quality yet sustainable benefits based on the presented data.

Mike Clarke emphasized the importance of educating members about available healthcare resources and the value of preventive care. He noted that many individuals did not engage in preventive care, which led to more serious health diagnoses later. He highlighted that overall healthcare costs arose from individual interactions within the healthcare system. Clarke reassured that his team, along with SFHSS leadership, continuously work to optimize spending, monitor plan experience, and ensure reasonable rate forecasts.

Vice President Zvanski asked Mike Clarke if there were areas where improvements could be made. Mike Clarke responded that SFHSS had managed healthcare costs more effectively than most clients. He suggested that continuing to hold health plans accountable and raising awareness of available healthcare resources would be beneficial. Vice President Zvanski then inquired whether better educational programs or systems were needed. Mike Clarke clarified that rather than creating new programs, the focus should be on reinforcing and promoting existing resources provided by SFHSS and health plans. Director Yant acknowledged the Board’s efforts in developing two strategic plans, including the current one nearing completion. She noted that the Board had been progressive in selecting strategies to contain costs and improve outcomes. She highlighted the importance of supporting primary care, mental health, and equity issues while improving operational efficiency. She also pointed out the severe healthcare workforce shortages across all disciplines, emphasizing the need to support workforce development, particularly in behavioral health. Director

Yant encouraged the Board to consider these factors in their strategic planning and to follow the guidance of the California Healthcare Advisory Board to address future challenges. She concluded by stressing the importance of proactively thinking about the strategic plan before formalizing the process.

PUBLIC COMMENT:

Lois Scott, Retiree, Protect Our Benefits- Raised concerns about health plans are using Artificial Intelligence (AI) and cited class action lawsuits. She asked how AI is being used particularly in customer service and prior authorizations.

Fred Sanchez, President of Protect our Benefits: Raised concerns about health plans are using Artificial Intelligence (AI) and cited class action lawsuits.

12. REVIEW AND APPROVE VSP VISION FULLY INSURED 2026 RATES AND CONTRIBUTIONS: (Action)

[See pdf of the VSP Vision Fully Insured 2026 Rates and Contributions presentation](#)

Presented by Mike Clarke, Aon – Lead Actuary presented the following information:

- Rate Setting Methodology Preface- Health Plan Funding
- Health Plan Rate Setting Process for Next Plan Year
- Introduction VSP Vision Fully Insured Rate Renewal
- Today’s Recommendation
- Current 5-Year Agreement Background
- 2026 VSP Vision Fully Insured Rate Renewal
- Recent Loss Ratio Experience— Basic Plan Only and —Premier Plan Only
- 2026 VSP Vision Fully Insured Rate Renewal—Monthly
- 2026 VSP Vision Fully Insured Rate Renewal—Annualized
- Recommendation for HSB Action—VSP

Vice President Zvanski asked Mike Clarke if there had been any requests for computer vision care from retirees or non-active members. Mike Clarke responded that he was not aware of any such requests. He noted that computer vision care was part of an MOU and deferred to SFHSS for further information, suggesting a follow-up might be needed.

Supervisor Dorsey moved to approve the 2026 VSP Vision plan, monthly insured premium rates and Premier Plan member contributions as presented. Commissioner Cremen seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Dorsey, Sass, Wilson, and Zvanski Noes: None

ACTION: The Health Service Board unanimously approved the 2026 VSP Vision plan, monthly insured premium rates, and Premier Plan member contributions as presented.

REGULAR BOARD MEETING MATTERS

13. BLUE SHIELD MEDICARE ADVANTAGE PPO TRANSITION UPDATE: (Discussion)

Rey Guillen, SFHSS Chief Operations Officer, Olga Stavinskaya-Velasquez, SFHSS Operations Manager and Tiffany Gill, Blue Shield of California Major Account Manager presented the following

items:

- Blue Shield MAPD PPO Transition January 2025 Update
- Core Medical MAPD PPO Medical Services
- Blue Shield MAPD PPO Supplemental Benefit Alignment
- HSS Call Metrics – January 2024
- BSC Call Metrics – January 2025
- Blue Shield MAPD-PPO Key Category Watch List
- Looking Ahead

Vice President Zvanski asked if most members were local, specifically in the Bay Area or Northern California. Rey Guillen responded that the majority of retired members lived in the Bay Area, though some were out of state. He noted that while out-of-state members were a small group, they appeared to experience a higher proportion of issues based on the calls received.

Commissioner Sass asked on slide 6 why the United Healthcare column only displayed rates for a 30-day supply and did not include a 90-day supply option. He mentioned that he had previously received 90-day prescriptions under United Healthcare and continued to do so under Blue Shield, but the slide did not reflect those options accurately. He also noted that the 100-day supply listed was only available through preferred pharmacies, lacking standard retail numbers.

Commissioner Sass asked about denials, expressing concern over whether they were reviewed by individuals rather than automated algorithms. He noted that since this was the second month of a new program, the transition might be challenging for members, particularly seniors. He wanted to understand expected denial levels, how statistics relate to individual experiences, and how affected members could seek help. He also emphasized the need for a clear and accessible process for members to resolve denials without navigating a complicated automated phone system.

Tiffany Gill explained that denials varied, including those for prior authorizations, formulary issues, and refill timing. She acknowledged that they were working on gathering more detailed data on expected denial rates. She assured that members should call the concierge member services line, which provides direct assistance without a phone tree. She clarified that while AI helps approve medical prior authorizations, a provider always makes the final decision on denials, ensuring that no AI system denies medical treatment.

Vice President Zvanski expressed concern about the frustration retirees face when dealing with multi-step processes, especially those who are not tech-savvy. She emphasized that unresolved issues and follow-up challenges could lead members to give up on seeking necessary services. She urged that customer service efforts focus on catching and resolving issues at the first step to prevent repeated frustrations and ensure proper follow-up for affected members. Tiffany Gill acknowledged the concerns and reassured that members should feel comfortable calling back for assistance. She shared that data showed only 21 individuals had called more than three times in January and noted that call wait times had significantly decreased. She highlighted that customer service representatives were spending an average of 15 minutes per call, assisting members with pharmacy and provider-related issues. She also explained that proactive follow-ups, such as outreach to providers regarding transition fills, were being implemented. Vice President Zvanski reiterated the importance of ensuring retirees receive needed services without frustration. She suggested systematic follow-ups to confirm members successfully resolved their issues. She emphasized that medication access is critical to members' quality of life and thanked Tiffany Gill for the attention given to these concerns.

Commissioner Wilson asked for more data on prescription issues, suggesting that a dashboard with key metrics would help provide better context and proportionality. She acknowledged that while most

prescription transitions were smooth, the personal impact of delays or problems was significant. Vice President Zvanski added that issues could arise when medications were switched to generic versions without proper member notification. She emphasized the importance of consistent follow-up, as generics might not work for everyone. Commissioner Wilson reiterated her request for a dashboard displaying prescription-related data in future reports, making it easier to assess the scope of issues. Tiffany Gill agreed and acknowledged the importance of including clear numerical data in future presentations to provide better insights.

Commissioner Wilson asked to clarify the difference between Blue Shield's in-home wellness visits and United Healthcare's ongoing chronic care services. She wanted to ensure they were not being presented as the same, noting that United Healthcare's program provided continuous home-based care, whereas Blue Shield's visits seemed more like a one-time wellness check. Tiffany Gill confirmed that Blue Shield's in-home wellness visits were annual and distinct from United Healthcare's ongoing chronic care program. She explained that while United had used Landmark for in-home care, Blue Shield used Altas in the Bay Area for members with ongoing care needs. Commissioner Wilson acknowledged that this information was helpful, especially since some retirees had been concerned about losing Landmark's services during the transition. She expressed relief that a replacement service was in place.

Commissioner Wilson asked about the high volume of provider calls during the early transition period. She inquired about the nature of the calls, whether they were related to patient verification, payment concerns, or other issues, and whether the volume had since decreased. Tiffany Gill confirmed that 9,333 was the total number of calls received but clarified that this figure included all providers, not just SFHSS providers. She explained that most inquiries were about benefits, patient coverage, and prior authorization processes. However, she noted that there was no specific way to track SFHSS provider calls separately, as SFHSS members had a dedicated support line.

PUBLIC COMMENT:

Christine Mullenbach: Expressed her parents faced significant challenges accessing medical treatments and prescriptions. Expressed frustration over the lack of communication with the transition.

Cynthia Maria, Retiree: Expressed frustration with communication and shared her medication was not in the formulary, despite the doctor having sent the approval.

Lois Scott, Protect Our Benefits: Raised issues with acupuncture and chiropractic service access under Blue Shield California, specifically due to subcontracting with American Specialty Health (ASH)

Elaine, Retiree, San Francisco Fire Department: Raised concerns about customer service during the transition.

Fred Sanchez, Retiree, President Protect Our Benefits: Requested a special meeting to address transition-related healthcare issues, including treatment denials, access delays, and provider availability.

Oliver Okoro, Retiree, Department of Transportation: Raised concerns about a significant increase in specialty visit costs copays.

Darcelle Grace, Retiree: Raised concerns about prescription benefit discrepancies specifically regarding 90-day mail-order prescriptions versus 30-day.

Herb Wiener: Expressed frustration that benefits were not automatically transferred, leading to treatment denials and burdensome administrative hurdles. Suggested that Blue Shield publish clear appeal procedures for denied claims.

Ray Casa, Retiree: Raised concerns about increased out-of-pocket costs for UCSF visits, raising specialist co-pays. Suggested partnering with the YMCA. Shared a positive experience with Amazon Pharmacy, noting that mail-order prescriptions arrive within one to two days.

Julie Collins: Raised issues with acupuncture and chiropractic service access under Blue Shield California, specifically due to subcontracting with American Specialty Health (ASH)

14. SFHSS DEMOGRAPHICS REPORT: (Discussion)

[See pdf of the SFHSS 2025 Demographic Report](#)

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

- Medical Enrollment
- Total SFHSS Members
- Dental & Vision
- FSA and Voluntary Benefits
- Employee Race & Ethnicity
- Prop B and Retiree Rates
- New home for the SFHSS Demographics Report

Commissioner Cremen provided feedback on search functionality, noting that searching for "HSS" on Data SF only returned call center metrics, whereas "SFHSS" yielded the correct results. Commissioner Cremen suggested flagging this issue to improve searchability. Rin Coleridge acknowledged the feedback and assured that the change would be implemented within an hour.

Commissioner Wilson asked whether the data was updated live or on a monthly basis. Rin Coleridge explained that the report was an annual demographic report that took eight months to develop due to backend restructuring. Rin Coleridge stated that, despite resource constraints, the team had established the necessary queries and processes, allowing for more frequent updates in the future.

PUBLIC COMMENT: None

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

Heather Chianella stated UnitedHealthcare provides a dental plan for members. Heather introduced her colleague, Monica Andrade, who will attend Board meetings and interact with HSS staff throughout the year.

PUBLIC COMMENT: None

16. SFHSS EXECUTIVE DIRECTOR RECRUITMENT UPDATE: (Action)

[See pdf of the SFHSS Executive Director Recruitment Update presentation](#)

Amanda Kreller, Director of Healthcare and Public Sector, and Efton Hall Jr. Senior Vice President Healthcare & Public Sector Practices, with Berkeley Search Consultants presented the following items:

- Our Philosophy: Berkeley Search Consultants
- Our numbers
- Our Approach
- Advertising and Sourcing Strategy
- Brochure
- Recruiting Process

Commissioner Cremen asked about the number of applicants. Amanda Kreller responded that

there were 330 direct applicants, with 81 coming from outreach, describing it as a good turnout.

Vice President Zvanski asked whether local candidates, particularly from Northern California or the Bay Area, were considered in the selection process. Efton Hall Jr. confirmed that local candidates were included and explained that the process began with a strong local focus before expanding nationally, emphasizing that regional understanding was an important criterion alongside other key criteria such as skills and experience.

Commissioner Sass emphasized the importance of professional relationships in attracting qualified candidates. He cited Executive Director Yant as an example of someone who leveraged her long history in the Bay Area to build a strong team.

President Hao acknowledged that Efton Hall Jr., Amanda Kreller, and Julia Morse dedicated significant time to understanding the Health Service System, its members, and its mission. She appreciated their efforts in considering these factors while vetting candidates and expressed her gratitude.

President Hao confirmed the Health Service Board will meet on Thursday, February 27 in a special meeting to review candidate resumes.

PUBLIC COMMENT:

Fred Sanchez, President of Protect Our Benefits: Acknowledged the importance of finding a local candidate.

17. VOTE ON WHETHER TO HOLD CLOSED SESSION REGARDING THE APPOINTMENT OF SAN FRANCISCO HEALTH SERVICE SYSTEM ACTING EXECUTIVE DIRECTOR (Cal. Govt. Code 54957(b) and San Francisco Administrative Code Section 67.10(b)): (Action)

Commissioner Howard moved to hold a closed session regarding the appointment of the San Francisco Health Service System Acting Executive Director. Vice President Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Dorsey, Sass, Wilson, and Zvanski Noes: None

ACTION: The Health Service Board unanimously approved holding a closed session regarding the appointment of the San Francisco Health Service System Acting Executive Director.

**CLOSED SESSION:
Government Code Section 54957(b)(1) and San Francisco Administrative Code Section 67.10(b)**

18. CLOSED SESSION: VOTE TO APPOINT THE SAN FRANCISCO HEALTH SERVICE SYSTEM ACTING EXECUTIVE DIRECTOR: (Action)

Presented by President Hao

ACTION:

RECONVENE IN OPEN SESSION

Meeting continues in Closed Session for approximately twenty minutes

19. VOTE TO ELECT WHETHER TO DISCLOSE ANY OR ALL DISCUSSION HELD IN CLOSED SESSION REGARDING APPOINTMENT OF SAN FRANCISCO HEALTH SERVICE ACTING EXECUTIVE DIRECTOR (San Francisco Administrative Code Section 67.12(a)) (Action):

Commissioner Cremen moved to disclose any or all discussions in closed session regarding the appointment of the San Francisco Health Service System Acting Executive Director. Commissioner Wilson seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Dorsey, Sass, and Wilson Noes: Zvanski

ACTION: The Health Service Board approved disclosing any or all discussion held in closed session regarding the appointment of the San Francisco Health Service System Acting Director.

20. POSSIBLE REPORT ON ACTION TAKEN IN CLOSED SESSION REGARDING APPOINTMENT OF SAN FRANCISCO HEALTH SERVICE ACTING EXECUTIVE DIRECTOR (Government Code Section 54957.1 and San Francisco Administrative Code Section 67.12(b)) (Action):

Vice President Zvanski moved to report on action taken in closed session regarding the appointment of the San Francisco Health Service System Acting Director. Commissioner Howard seconded the motion.

PUBLIC COMMENT: None

VOTE: Ayes: Cremen, Hao, Howard, Dorsey, Sass, Wilson, and Zvanski Noes: None

ACTION: The Health Service Board unanimously approved reporting the action taken in closed session regarding the appointment of the Health Service System Acting Director.

President Hao announced the Health Service Board unanimously appointed Rey Guillen as the Acting Director, effective March 15, 2025. Rey Guillen thanked the Board for the opportunity and looks forward to the work ahead.

21. ADJOURNMENT: 4:29 p.m.

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

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; the Chair has the discretion to limit public comment to less than 3 minutes per member of the public.
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 p.m. 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 and the Board Secretary will note on the record during the specific agenda item that the Board received written public comment on that item, and will include that note 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. Remote public comment from people who have received 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. There are elevators and accessible restrooms located on every floor. **Wheelchair-accessible entrances are located on Van Ness Avenue and Grove Street. Please note the wheelchair lift at the Goodlett Place/Polk Street is temporarily not available.** After multiple repairs that were followed by additional breakdowns, the wheelchair lift at the Goodlett/Polk entrance is being replaced for improved operation and reliability. We anticipate having a functioning lift after the completion of construction in May 2025.

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 [January 9, 2025 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.

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.