

DATE: June 10, 2021

TO: Dr. Steven Follansbee, President, Members of the Health Service Board

FROM: Abbie Yant, RN, MA Executive Director SFHSS

RE: June 2021 Board Report

SFHSS is Operating in a Virtual Environment and is Closed to the Public

COVID-19 Update

As you are aware the COVID-19 pandemic continues to impact our communities. SF DPH is the lead agency advising us on precautions to take during these months of lower COVID-19 cases and **the vaccine is now readily available**. We encourage all our members to get the vaccine.

<https://sfhss.org/news/covid-19-vaccine>

<https://sf.gov/get-vaccinated-against-covid-19>

Reminder: Vendor Black Out Period – Extended

The HSB approved the Vendor Black Out period commenced February 13, 2020. As of June 11, 2020, the vendor Black Out Period was extended through the rest of this calendar year to include the period for the Medical Plan selection process which was presented to the Health Service Board in February 2021. Subsequently, SFHSS will be in negotiations with Medical, Dental and Vision plans for Plan Year 2022 and therefore the Vendor Black Out Period will continue through June 2021 after all rates and benefits are approved by the HSB.

Racial Equity Action Planning

SFHSS sponsored staff members on our Racial Equity Advisory Team to attend the 2021 Government Alliance for Race Equity (GARE) Annual Conference. This convening featured promising practices in the field of diversity, equity, and inclusion from visionary racial justice leaders across the nation. These insights help to shape SFHSS' racial equity work to improve staff programs, policy, and culture.

The Communications Division designed Celebrate Pride Month virtual backgrounds to use on MS Teams in alignment with SFHSS' core values of *Respect* and *Inclusivity*. This celebratory month was also recognized on a national scale through the June 1st *White House Proclamation on Lesbian, Gay, Bisexual, Transgender, and Queer Pride Month*¹. This publication recognizes the valuable contributions of LGBTQ+ individuals across America and reaffirmed a commitment to standing in solidarity with LGBTQ+ Americans in their ongoing struggle against discrimination and injustice. A new blog about mental health resources for LGBTQ+ communities is now featured on the [Well-Being website](#).

47 states and the District of Columbia now recognize Juneteenth (19th) in commemorating the end of slavery in the United States, specifically the moment when those last enslaved in Galveston, Texas, received word of their freedom. The arduous history of these minority groups who have struggled for decades to overcome inequities is manifesting in social change. Please join me in appreciating the work of those engaged in efforts to create lasting equity and inclusion for all.

Reference: 1 – White House Proclamation June 1st: <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/06/01/a-proclamation-on-lesbian-gay-bisexual-transgender-and-queer-pride-month-2021/>

Sutter Health Lawsuits (see attached)

Attached to this report is a summary of the UFCW & Employers Benefit Trust v Sutter Health (2014); Also joined by People of the State of California ex. Rel Xavier Becerra v Sutter (2018) <https://www.sutterhealthlawsuit.com/Home/Documents>. Of note is that a number of local experts were disposed for the trial including Catherine Dodd, Retired SFHSS Director.

The second lawsuit, not yet settled is Sidibe v. Sutter Health (2014.) We will update the HSB as this case proceeds. For more information please see the UC Hastings latest brief: <https://sourceonhealthcare.org/case-brief-sidibe-v-sutter-health-the-oldest-chapter-in-the-sutter-antitrust-saga-sees-new-light-for-class-plaintiffs/>

Blue Cross Blue Shield Settlement Notice

Some of our members have also received notices regarding the Blue Cross Blue Shield Association class-action suit. It is a \$2.67B settlement, however, since we are a government entity, SFHSS is not a member of the class. If an SFHSS member had Blue Cross Blue Shield insurance from another employer – they may investigate on their own by accessing information provided in the email, postcard, or letter or to the website: Blue Cross Blue Shield Antitrust Litigation MDL 2406, N.D. Ala. Master File No. 2:13-cv-20000-RDP. <https://www.bcbssettlement.com/>

Follow up from Health Plans for Prior HSB Meetings

Delta Dental

SFHSS is meeting weekly with Delta Dental to address the following concerns. Measurable objectives and reporting requirements are in process. SFHSS and Delta will update the HSB quarterly.

1. Network

Concern: Provider access and specifically reports that providers are resigning from the network with the Bay Area; most expressly Sonoma County.

Concern: Members have expressed confusion regarding Delta's PPO and Premiere Networks.

2. Satisfaction Scores with Providers and Members

Concern: Direct feedback to the Health Service Board via the board email account and public comment that network providers have significant dissatisfaction with Delta's administration and reimbursement rates.

3. SmileWay Wellness Program

Concern: The SmileWay program, which offers enhanced preventive services, continues to be underutilized and is confusing to members and providers.

4. Preventative Utilization-Active Plan

Concern: Utilization of no-cost, preventive dental services are underutilized by active employees in the Delta PPO plan.

Blue Shield of California – Infertility Services Website

BSC has posted its Infertility Services website. https://blueshield-prod.modolabs.net/bsca13/bsca13_programs_services/_infertility_services

Administration Update

Quarterly Email Tracker Report will be presented in August

Legislative Report – (see attached report)

SFHSS DIVISION REPORTS: May 2021

PERSONNEL

Welcome

- 1210 – Jacqueline “Jaila” Lafaye-Wright

Recruitments:

- 0931 Operations Manager: New 0931 starts 6/14/21
- 0932 Enterprise Systems and Analytics Director: near hiring decision
- 1054 IS Business Analyst – recruitment in process
- 1824: Principle Administrative Analyst: preparing for recruitment

Employees' Working Status:

- Due to Shelter-in-Place provisions, HSS employees have been performing a mix of duties in a variety of locations, including but not limited to essential HSS work both in the office and remotely and Disaster Service Assignments at various locations, when possible.

OPERATIONS

- Our offices remain closed to the public. We currently have three to four staff on-site Tuesdays and Fridays to perform essential work. Currently assessing needs to re-open office in accordance with City policy and to have onsite staff during October's open enrollment.
- Member Services took over 4213 calls in May. All customer service metrics were met.
- Top call topics included general benefit, eligibility questions, and delinquencies/ payments.
- Divisional OE meetings/discussions continue to prepare for Open Enrollment 2021.
- A new Member Services Manager has been appointed and will begin June 14th. A formal announcement and introduction will be presented in the next Health Service Board meeting.
- Additional project-based staff will be hired for open enrollment. That will include 2 benefits analysts and 2 benefit technicians. These positions are currently under recruitment.
- Operations have worked with Workterra to schedule the mid-year enrollment for voluntary benefits beginning July 6th until the 16th. In addition to an improved Short Term Disability benefit and an additional Supplemental Life benefit, the offerings will include the BenefitHub Platform that will provide Auto and Home Insurance options as well as an improved microsite that will feature all the Workterra Voluntary Benefits products.

ENTERPRISE SYSTEMS & ANALYTICS (ESA) (see attached slides)

- Enterprise Systems and Analytics are focused on bringing new capabilities to HSS and improving/enhancing the systems and analytics we currently leverage to serve our members.
- HSS met with the Department of Technology (DT) on 5/27 to attend a demonstration of the new contact center solution. This would provide increased capabilities for our call

center. No specific dates as to when HSS would implement. DT is working with the 3rd party contracted vendor on licensing, costs, scoping and next steps for HSS to move this forward.

- Development for eBenefits for CCD has been completed and testing is underway. By Open Enrollment, all HSS members will be able to access eBenefits
- Presentation of a data measurement plan was delivered to internal stakeholders. Additional analytics continue based on stakeholder feedback.
- Identified and corrected issues with documents imported from Peoplesoft into the Enterprise Content Management system. These issues only impacted documents flowing from this source. These documents could not be rotated/annotated which impacted the ability to work with the documents. Additionally, in some cases, the documents came in and appended to existing pages in a member file instead of coming in as separate pages
- ESA deployed production modifications to the Citybase end-user load file. This is our online member payment system Post go-live, HSS encountered scenarios that caused errors. This file has now been enhanced to increase reliability and address these issues.
- Single Sign-on to the Workterra portal is in testing. This will provide additional security and make it easier for employees to connect to the system.

COMMUNICATIONS

- Revamping the New Retiree experience - Developing New Retiree videos to help guide members on their actionable steps to secure retiree benefits.
- Open Enrollment - Developing guides and booklets for the plan year 2022. Collaborating with all health plans on educating members with new life stages webinars. Developing new OE videos to drive members to learn about new plans.
- Social Media – Celebrating Pride Month
- Website – Selected new Drupal vendor and developing onboarding plan for website development work
- eNews – Invite prospective retirees to schedule online retiree consultations in June. Encourage members to use their insurance for COVID testing.
- Onboarding two interns from SFDPH this summer to help with program support.

FINANCE DEPARTMENT

Current Fiscal Year 2022-21

- Completed transactions for Q3 close General Fund Administrative budget– no outstanding transactions
- All staff completed refresher training on Year-End Close activities
- Conducted annual review of suppliers for compliance with City policies on 12X – Banned States, 12 B – Equal Benefits, 14 B – Local Business Enterprise, and business taxes paid
- Working on FY 2020-21 Year-End Close Activities
 - Notified suppliers and interdepartmental services of close schedule
- Initiated an earlier start to the annual Trust financial audit to reduce resource conflicts during the upcoming open enrollment preparation
 - Produced 84% of documents requested by auditor, MGO

Policies & Procedures, Process Improvement:

- Hosted second cross-divisional meeting on the Check Refund Improvement Process

Projects/Planning/Budgeting/Procurement:

- Finalizing Mayor's Phase and transitioning to Board of Supervisors Phase of revised FY 2021-22 and FY 2022-23 budgets
- Submitted claim to be included in the UFCW v. Sutter settlement
- Collaborate on analysis of FSA accounts
- Calendar Year 2022 Rates & Benefits
 - Renewals/New Plans

CONTRACTS

- Executed amendment to agreement with the YMCA of San Francisco for Diabetes Prevention Program
- Issued request for proposals for Employee Assistance Program and Mental Health counseling for City employees, first responders, and frontline personnel
- Executed agreement with Blue Shield of California for Blue Shield of CA PPO – Accolade plan implementation process
- Executed agreement with California Creative Solutions, Inc. for Drupal website support, maintenance, and new development

WELL-BEING (see attached slides)

- Hit 1 year since the Launch of the Cordico App. A total of 3,345 downloads (54% of all first responder department employees) and 64,715 Module clicks.
- SFHSS EAP Counselor Jeff Lintner provided training for the Peer Mediators in partnership with DHR. A Net Promoter Score (NPS) of 58.3 (Excellent) was reported by all participants.
- Created a Return to Work checklist for Managers/Leaders and Employees, and distributed it to DPH and the Covid Command Center (CCC)

Attachments:

COVID-19 Updates from Health Plans
Vendor Black Out Memo
UFCW & Employers Benefit Trust v. Sutter Health Status Report
Legislative Report Tracking
ESA Slide
Well-Being Slides

SFHSS Specific Data – Testing

Cases:	Blue Shield of California (BSC) as of 4/30	Kaiser [1]		UnitedHealthcare (UHC)	
		Non-Medicare as of 5/26	Medicare as of 5/26	Non-Medicare as of 6/2	Medicare as of 5/9
Confirmed	524	NR	NR	131	693
Probable	NR	NR	NR	2	10
Possible	NR	NR	NR	34	29
Total	524	NR	NR	167	732
Test Results:					
Positive	524	3,030	471	23	58
Negative	13,773	50,947	10,119	419	1,471
Inconclusive / Unknown	NR	NR	NR	869	4,518
Total	14,297^[2]	53,997	10,590	1,311	6,047

NR = Not Reported

[1] Does not represent unique members

[2] May be underreported due to claim submission lag

SFHSS Specific Data – Vaccine

Vaccine Type:	Blue Shield of California (BSC) as of 4/30	Kaiser		UnitedHealthcare (UHC)	
		Non-Medicare as of 5/26	Medicare as of 5/26	Non-Medicare as of 3/19	Medicare as of 5/19
Moderna	3,049	16,272	9,337	Fully: 602 Partial: 175	Fully: 3,195 Partial: 615
Pfizer	5,605	34,666	12,345		Fully: 2,939 Partial: 661
J&J (Single)	420	1,305	224		Fully: 205
Total	9,074	52,243	21,906	777	7,565

COVID Health Plan Benefit Info

	BSC as of 2/28/2021	Kaiser Non-Medicare as of 5/26/2021	Kaiser Medicare as of 5/26/2021	UHC Non-Medicare as of 5/3/2021	UHC Medicare as of 5/24/2021
Early Rx Refills Available?	Yes	At Pharmacist's discretion and may allow up to a 100-day supply (no end date on this)	At Pharmacist's discretion and may allow up to a 100-day supply (no end date on this)	Yes, through 1/20/2021	Yes, through 8/31/2020
Tele-Medicine	Via PCP: Copays waived Via Teladoc: No copay	No copay (no end date on this)	No copay (no end date on this)	COVID related copays waived through 4/20/2021 Non-COVID related copays waived through 9/30/2020	COVID treatment related copays waived through 3/31/2021 COVID testing related copays waived through 7/19/2021
Tele-Behavioral Health	No copay	No copay (no end date on this)	No copay (no end date on this)	COVID related copays waived through 1/20/2021 Non-COVID related copays waived through 9/30/2020	COVID related copays waived through 3/31/2021
Testing / Diagnostics	Copays waived	Copays waived through the last day of the month following the end of the national public health emergency	Copays waived through last day of the month following the end of the national public health emergency.	Copays waived through 4/20/2021	Copays waived through 7/19/2021

COVID Health Plan Benefit Info (cont.)

	BSC as of 2/28/2021	Kaiser Non- Medicare as of 5/26/2021	Kaiser Medicare as of 5/26/2021	UHC Non-Medicare as of 5/3/2021	UHC Medicare as of 5/24/2021
Treatment	Copays waived for treatment between 3/31/2020 – 2/28/2021	Copays waived through 7/31/21	Copays waived through 12/31/21	Copays waived through 4/20/2021 Out of Network waived through 10/22/2020	Copays waived through 3/31/2021
Specialist and Primary Care	If a member presents at a specialist office and receives testing or treatment with a COVID-19 diagnosis, there would be no member cost share for services	Copays waived through 7/31/21	Copays waived through 7/31/21	Pan deductible and coinsurance applies	Copays waived through 9/30/2020 for specialist; through 12/31/2020 for Primary Care
Other	https://www.blueshieldca.com/coronavirus/your-coverage	https://healthy.kaiserpermanente.org/northern-california/health-wellness/coronavirus-information	https://healthy.kaiserpermanente.org/northern-california/health-wellness/coronavirus-information	Emotional support line available: 1-866-342-6892 Sanvello: On-demand emotional support mobile app, free to members https://www.uhc.com/health-and-wellness/health-topics/covid-19	

MEMORANDUM

DATE: June 10, 2021
TO: Dr. Stephen Follansbee, President, and Members of the Health Service Board
FROM: Abbie Yant, RN, MA Executive Director SFHSS
RE: Black-Out Notice Extension through June 2021

This memorandum shall notify the Health Service Board (“Board”) of the Blackout Period in connection with the San Francisco Health Service System (“SFHSS”) competitive bid process for the medical plans and the Rates and Benefits process for the 2022 plan year.

Pursuant to the Board’s Service Provider Selection Policy, the Board must be notified of a Blackout Period prior to the release of any solicitation for the selection of a primary service provider and also includes the annual SFHSS Rates and Benefits process.

During the Blackout Period, the Board is prohibited from any communications with a potential SFHSS service provider on matters relating to SFHSS contracting except communications on SFHSS matters during Board or Board Committee Meetings.

Communications include face-to-face conversations, telephone conversations, email, text messages, letters, faxes, or any other social media, written or electronic communications.

Any communications with service providers for reasons unrelated to SFHSS during the Blackout Period must be immediately disclosed in writing to the Director and the Board.

The HSB approved the Vendor Black Out period commenced February 13, 2020. As June 11, 2020 the vendor Black Out Period was extended through the rest of this calendar year to include the period for the Medical Plan selection process which was presented to the Health Service Board in February 2021. Subsequently, SFHSS will be in negotiations with Medical, Dental and Vision plans for Plan Year 2022 and therefore the Vendor Black Out Period will continue through June 2021 after all rates and benefits are approved by the HSB.

MEMORANDUM

DATE: June 10, 2021

TO: Dr. Steven Follansbee, President, and Members of the Health Service Board

FROM: Abbie Yant, RN, MA Executive Director SFHSS

RE: United Food and Commercial Workers & Employers Benefit Trust v. Sutter Health Status Report

Overview

This status report provides a summary of the landmark Sutter Health case including a synthesis of settlement terms and lessons learned for fiduciaries and employer purchasers. This status report is a precursor to a Health Service Board presentation about regulatory changes in transparency that is planned for Fall 2021.

Case Background

The complaint filed on April 7, 2014 alleges that since the early 2000s Sutter Health has used anticompetitive contract terms and contracting practices with the major health insurance companies in California to insulate itself from competition and to increase prices¹. Sutter Health used the market power of certain “must have” providers to compel these insurance companies to include all Sutter Health hospitals, outpatient facilities, and physicians in their insurance products, even though several of those providers were more expensive than available alternatives. Further, Sutter Health prohibited the insurance companies from giving incentives to patients that would steer them away from high-cost Sutter providers and from disclosing information about Sutter Health’s prices to self-funded payors or insured individuals. As a result, patients have had limited ability and little or no incentive to choose a high-quality competing provider based on price. This has enabled Sutter Health to charge substantially inflated prices. SFHSS ended up partnering with Blue Shield of California (BSC) and UnitedHealthCare (UHC) to provide our non-Kaiser members access to Sutter providers and facilities. As administrators for SFHSS, access to Sutter providers and facilities were through the respective contracts that each health plan had with Sutter.

Timeline of Class Action Lawsuit

The court denied Sutter Health’s motion to dismiss in April 2016 and certified the plaintiff class action lawsuit in August 2017¹. Xavier Becerra, California’s Attorney General at the time, joined the lawsuit in March 2018. On October 16, 2019, on the eve of a three-month jury trial and after 5-1/2 years of litigation, the parties announced a settlement of \$575 million and comprehensive injunctive relief, subject to approval by the Court. On December 19, 2019, the United Food and Commercial Workers (UFCW) & Employers Benefit Trust filed for preliminary approval of the settlement. The court ordered a new process to select the Monitor who will oversee compliance with the injunctive relief. On March 9, 2021 the Superior Court of the State of California, City and County of San Francisco granted preliminary approval of the \$575 million settlement. In April, SFHSS submitted the claim form to be a member of the class. The next steps will occur after the effective date of the settlement, pending the final approval hearing that is scheduled for July 19, 2021. The claims administrator will calculate and distribute funds on a pro rata share that assigns a proportionate amount of income or losses to shareholders or members of a company based on their ownership percentages. PBGH estimates the average claim to be \$243K but SFHSS is unable to quantify the expected amount at this time. As a class member SFHSS can accept the amount or dispute using a formal process. During the time covered by the lawsuit, SFHSS used UHC for the self-funded PPO and BSC for the fully insured and flex funded HMO.

Settlement Terms: Injunctive Relief

The lawsuit shed light on longitudinal data about how well Sutter was doing financially: sustaining a 43% margin annually over the last decade^{2,3}. With all hospital profits coming from commercially insured patients, employers were paying the cost, including state purchasers. Sutter charged commercially insured patients 1.5 billion more annually but will only pay back \$575 million to the employers and unions affected by the case. This represents a negotiated amount that Sutter agrees was overcharged. Even more significant are the terms of the injunctive relief moving forward. These terms will have an even broader impact on the market assuming they are approved.

- Limit charges for out-of-network services under a fixed cap
- Increase transparency via access to pricing, quality, and cost information
- Halt contracting tactics that prevent health plans and employers from steering members to lower cost plans
- Stop all-or-nothing contracting deals (tiering out one Sutter hospital and losing all 24 hospitals)
- Cease anticompetitive bundling of services and products
- Cooperate with a court-approved compliance Monitor
- Set definitions on clinical integration and patient access

The Sutter Decision: Lessons for Plan Sponsors

The *National Alliance of Healthcare Purchaser Coalitions* hosted a national webinar about the landmark Sutter Health case². This webinar discussed broad concerns raised for health plan sponsors as fiduciaries, including their rights and responsibilities to demand accountability and transparency. Keynote speakers included Elizabeth Mitchell, President & CEO of the *Purchaser Business Group on Health*. Elizabeth noted that, "Sutter is just a case study in what is happening across the country. This is not unique to Northern California. What is unique and what is so important is that we are on the precipice of a significant settlement with implications for the entire market". Significant new rules for health systems will be coming out of the injunctive relief for Sutter, but these are transferrable nationally. Health plans can try to work on employer's behalf to make sure that these new standards are adhered to, but it requires employer oversight and engagement to leverage these new rules.

Drew Kallerstad, Co-Founder of *Health Plan Fiduciary Compliance*, noted that organizations should proactively monitor payment accuracy and appropriateness, fees, contracts, price, cost details, etc. to protect health plan participants. SFHSS ensures ongoing monitoring of these fiduciary activities including audits that appropriate rendering of health plan assets. SFHSS performs due diligence around claims accuracy and modification of health plan performance in alignment with RFP processes. Fiduciaries do encounter roadblocks in transparency, particularly barriers around data on how much they are paying, an insight that employer purchasers are entitled to. Court actions, legal proceedings like the Sutter case, and federal legislation around surprise billing can help to catalyze action around transparency for the future. In the meantime, it is important to clarify whether or not Sutter's higher cost is still impacting the City. For the City, as part of the California Pacific Medical Center (CPMC) Development Agreement, Sutter has complied with the following obligation: For the period from January 1, 2014 to December 31, 2016, the negotiated fee for service increase for CPMC shall not exceed 5% annually as compared to the prior calendar year fee for service rates. In the following seven (7) years CPMC shall limit annualized increases to no more than the Medical Rate of Inflation plus 1.5% (the "Annual Rate Increase").

References:

Official Case Name: *UFCW & Employers Benefit Trust v. Sutter Health, et al.*, Case No. CSG 14-538451, Superior Court of the State of California, City and County of San Francisco.

1. Case Document: [Motion for Preliminary Approval of Settlement – Redacted – December 20, 2019](#). *Cohen Milstein Sellers & Toll PLLC*
2. Recording: [Fiduciary Check In The Sutter Decision: Lessons For Plan Sponsors](#). *National Alliance of Healthcare Purchaser Coalitions*
3. Recording: [How A Hospital System Grew to Gain Market Power and Drove Up California Health Care Cost](#). *CBS News*

June 2021 Legislative Tracking

SFHSS is consolidating legislative tracking to provide the most pertinent and up to date information about benefits administration and public health to our Health Service Board. Below are brief descriptions and resource links related to policy tracking and regulatory updates.

Bill Became Public Law 5/20: [COVID-19 Hate Crimes Act \(S 937\)](#) – this bill requires a designated officer or employee of the Department of Justice (DOJ) to facilitate the expedited review and reporting of hate crimes. DOJ must issue guidance for state, local, and tribal law enforcement agencies on establishing online hate crime reporting processes, collecting data disaggregated by protected characteristic (e.g., race or national origin), and expanding education campaigns. Additionally, DOJ and the Department of Health and Human Services (HHS) must issue guidance aimed at raising awareness of hate crimes during the COVID-19 pandemic. The bill establishes grants for states to create state-run hate crime reporting hotlines. It also authorizes grants for states and local governments to implement the National Incident-Based Reporting System and to conduct law enforcement activities or crime reduction programs to prevent, address, or respond to hate crimes.

Guidance Issued 5/18: [Employer FAQs Regarding CDC's New Mask-Free Guidance](#) - CDC announced reducing mask requirements and social distancing for fully vaccinated people in most settings. Guidance is being issue in the form of Q&As for employers that are considering possible changes to their own mask and vaccination policies.

Guidance Issued 5/18: [Notice 2021-31 COBRA Premium Assistance Credit](#) - the Internal Revenue Service (IRS) issued guidance for multiemployer plans, employers, and plan administrators regarding the new credit available to them for providing continuation health coverage to certain individuals under COBRA.

Regulatory Update 5/17: [COBRA's Interaction with HSAs, HRAs and FSAs](#) – given the regulatory changes in recent years, the Departments of Labor (DOL) provided Q&As for plan sponsors about the interaction of COBRA with account-based plans like health savings accounts (HSAs), health reimbursement arrangements (HRAs), and flexible spending accounts (FSAs).









Program Launch 5/3: [HHS Launches Reimbursement Program for COVID-19 Vaccine](#) - the Department of Health and Human Services (HHS) announced the launch of a new program covering costs of administering COVID-19 vaccines to patients enrolled in health plans that either do not cover vaccination fees or cover them with patient cost-sharing.

Regulatory Update 4/7: [COBRA Premium Assistance](#) - the Departments of Labor (DOL) Employee Benefits Security Administration (EBSA) created a new webpage with resources for employers, advisers, and workers about COBRA premium assistance under the American Rescue Plan Act of 2021, including FAQs and model notices.

Additional Bills of Interest by Topic Area	
Amend Public Health Service Act: Special Enrollment Period for Pregnancy (HR 3126)	Rx Pricing for Federal Health Programs (HR 2829)
Amend Public Health Service Act: Exempt Certain Direct Primary Care Arrangements (HR 3436)	End Price Gouging for Medications Act (S 1323)
Amend Public Health Service Act: Improve Dental and Vision Coverage (HR 3461)	Hospital and Insurer Price Transparency Act (S 1524)
Amend Public Health Service Act: Primary Care and Behavioral Health Cost-Sharing (HR 3550)	Drug Price Transparency Act of 2021 (S 1523)
Chronic Disease Prevention Services Act (S 1424)	Family Medical Leave Modernization Act (S 1185)
Telehealth Expansion Act of 2021(S 1704)	Pandemic Leave Extension Act (HR 3040)

Enterprise Systems & Analytics Report

June 10, 2021

Project	Status	Key Accomplishments
Cybersecurity / Disaster Preparedness		<ul style="list-style-type: none"> • Met with DT and CON on 5/24 and 6/2 to discuss requirements for increased auditing of records viewed. • Obtained audit query of user access in non-production environments
VOIP telephony upgrade		<ul style="list-style-type: none"> • HSS attended demo of new contact center solution on 5/27. In discovery phase. • DT to work with 3rd party contracted vendor, ConvergeOne, on licensing costs, scoping, and next steps for HSS.
Enterprise Content Management System		<ul style="list-style-type: none"> • Identified and corrected two issues with documents imported from PeopleSoft.
Dependent Eligibility Verification Audit		<ul style="list-style-type: none"> • Next salesforce connector session has been scheduled to explore how to build out the functionality • Sandbox environment set up for initial development
eBenefits		<ul style="list-style-type: none"> • Testing of CCD pages initiated
Social Determinants of Health (SDoH)		<ul style="list-style-type: none"> • Internal presentation of SDoH and Data measurement plan completed • Identifying next level stakeholders • Additional analysis based on internal feedback is being conducted
Open Enrollment		<ul style="list-style-type: none"> • Initial testing of Workterra SSO conducted. Tests failed. • Attending BSC and Healthnet implementation meetings
System Enhancements		<ul style="list-style-type: none"> • Enhancements were made to the Citybase End User Load Files to increase reliability and address post launch issues



On Schedule, Adequate Resources, Within Budget, Risks in Control



Potential issues with schedule /budget can be saved with corrective actions



Serious issues. Project most likely delayed or significant budget overrun

Well-Being Monthly Report

Health Service Board Meeting | June 10, 2021

Return to Work- Transition Support

- COVID Command Center (CCC) Support:
 - ✓ All-Hands weekly meetings – wellness moment
 - ✓ Return to Work Guide - distributed to all DSWs
 - ✓ Weekly Transition bulletin - well-being messages promoting community and self-care
- Partnering with DPH Trauma Informed Systems division to co-promote mental health and mindfulness resources
- Partnering with DPH and DHR to support department efforts to prepare for transition
- Outlined a mental health and resiliency resource guide with SFHSS workshops, sponsored offerings, and web-based tools.

Returning to Work Guide



Moving towards recovery from the COVID-19 pandemic means organizational on-site operations will resume. Supporting the health and well-being of staff is critical. Proper planning will support strong working relationships, reduce anxiety, and facilitate a positive working atmosphere.

For Home Department Supervisors

Leaders must focus on relational practices to help support staff in the transition back to their home department. Consider the following tips to help cultivate staff cohesion and community in returning to work. Register for [Mental Health First Aid Training](#) for additional support with returning to work.

GAUGE CURRENT STAFF WELL-BEING

Assess staff concerns, fears, and hopes about returning to the worksite. Use the information gathered to guide your efforts in implementing staff support for the return to work.

- ✓ Facilitate an [all-staff survey](#) to give staff members a voice and discuss options to address results with staff.
- ✓ Have 1:1 conversations with DSW deployed staff to [learn about their experience](#) and ask how you can support their transition back.

FOCUS ON COMMUNITY BUILDING & CONNECTION

Your staff have not shared the same space for a while. Focus on bringing everyone together to re-establish community and focus on being present and supportive to one another.

- ✓ Establish welcome back activities for staff reconnection such as a morning huddle to share stories of appreciation for what staff missed. Brainstorm best practices with HR.
- ✓ Communicate often regarding health & safety policies and changes to work flow-- Ensure a climate where staff can be open about their experience, feelings, and concerns.

PROVIDE SPECIFIC, GENUINE, FREQUENT APPRECIATION TO STAFF

Assess staff concerns, fears, and hopes about returning to the worksite. Use the information gathered to guide your efforts in implementing staff support for the return to work.

- ✓ Download the [SFHSS Recognition & Appreciation Guide](#) and identify at least one leadership practice and one peer-to-peer practice to implement for your team.
- ✓ If you don't have an established recognition program and are interested in piloting one, Email well-being@sfgov.org

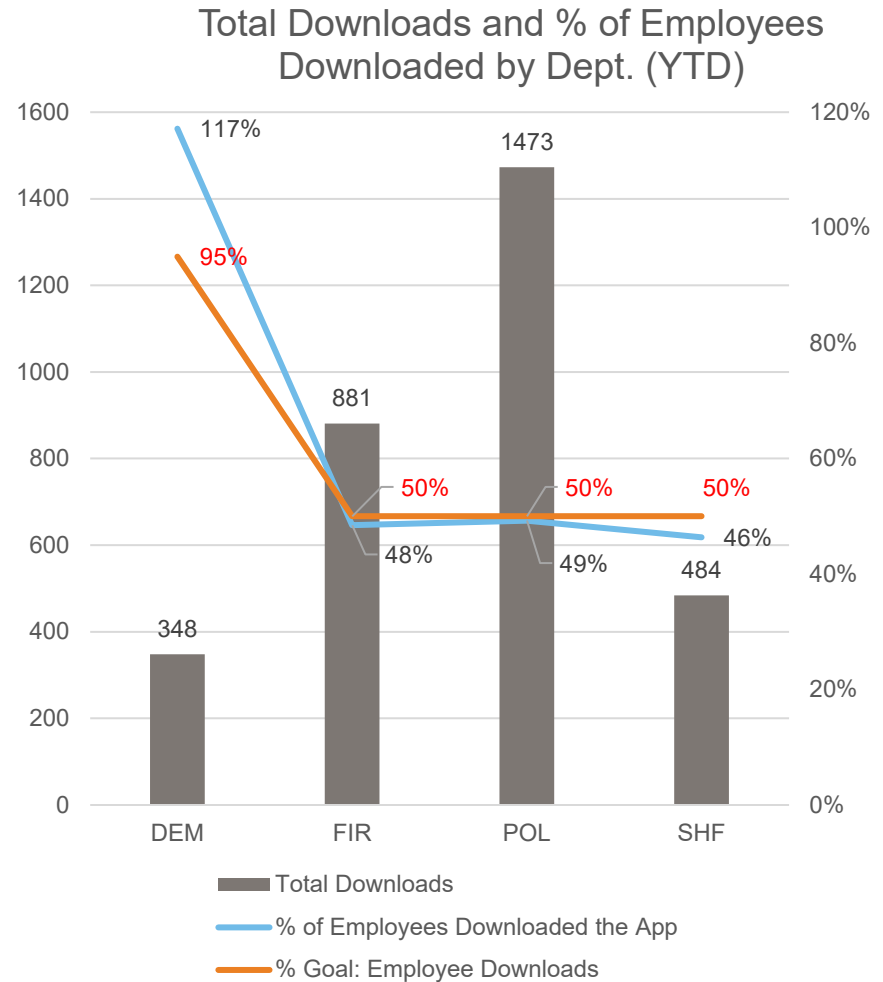
For additional support with organizational transition related to returning to work consider a consultation with SFHSS Employee Assistance Program. Contact eap@sfgov.org

[SFHSS.ORG/WELL-BEING](https://www.sfhss.org/well-being)



Behavioral Health: Cordico Wellness App

- Reached 1 year mark for launching the App
- Launched Feedback Survey – results pending
- 50% download goal met by DEM
 - 49% - FIR
 - 49% - POL
 - 46% - SHF
- Total downloads:
 - 3,345
 - 159 new downloads in May



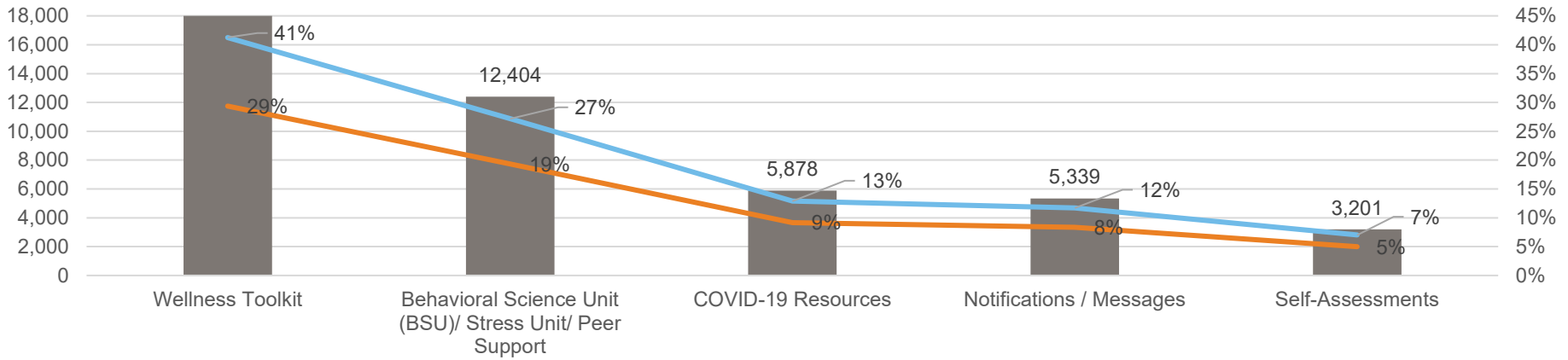
Data represented 5/25/2020 through 5/31/2021

Behavioral Health: Cordico Wellness App

Modules -

- Total of 64,715 modules clicks YTD
- May – Highest number of clicks by Dept.
 - ✓ DEM – Fitness Benefits (21)
 - ✓ FIR – Wellness toolkit (96)
 - ✓ POL – Behavioral Science Unit (372)
 - ✓ SHF – Find a Therapist (44)

Top 5 Modules Clicked: Total clicks, % of clicks within the top 5 modules and % of all module clicks



*Data represented 5/25/2020 through 5/31/2021

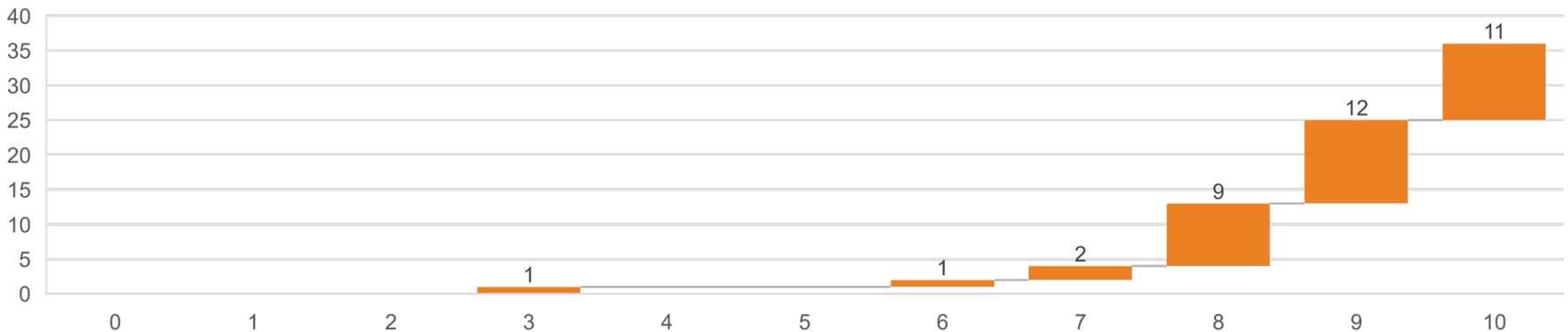
■ Total — % of Top 5 Clicks — % of All Clicks

Peer Mediation Training:

- Offered 2 trainings
 - ✓ 36 Peer Mediators were trained as a part of the DHR Peer Mediation Pilot program
 - ✓ 19 departments represented
 - ✓ 58.3 Net Promoter Score (NPS)
 - Score range of 100 to +100, a “positive” score for NPS above 0 is considered “good”, +50 is “Excellent,” and above 70 is considered “world class.”)

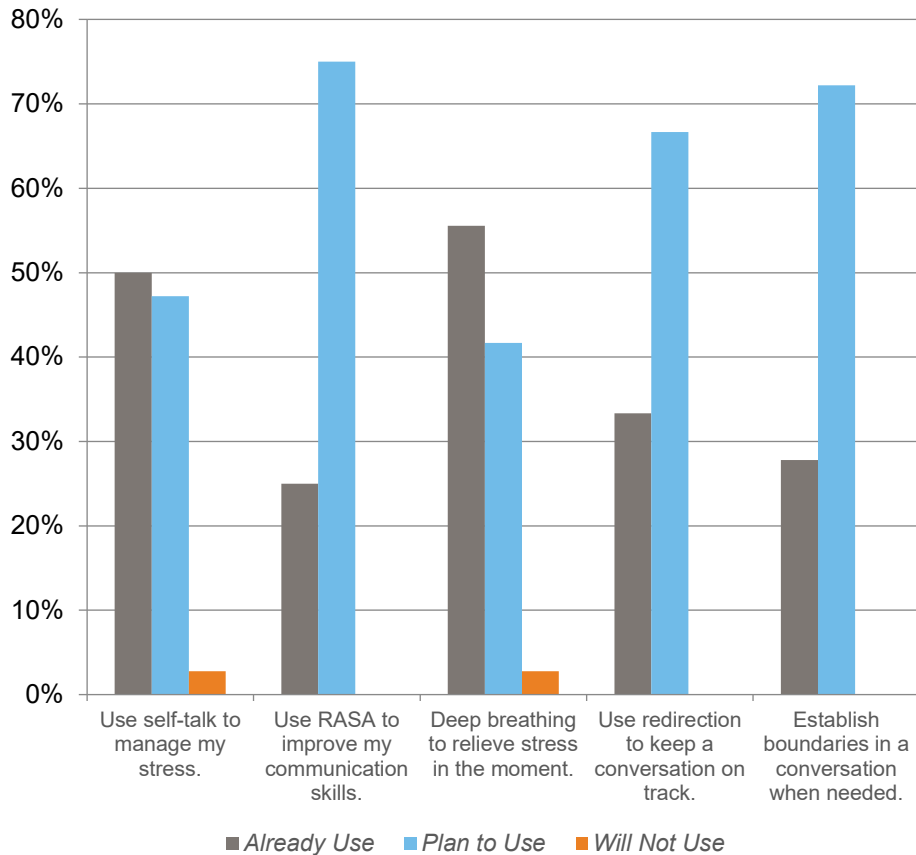
“Practical tips and language about how to redirect the conversation, summarize first, and set boundaries is what I found most valuable about the training.”

On a scale of 0 to 10, how likely are you to recommend this training to a colleague or friend?

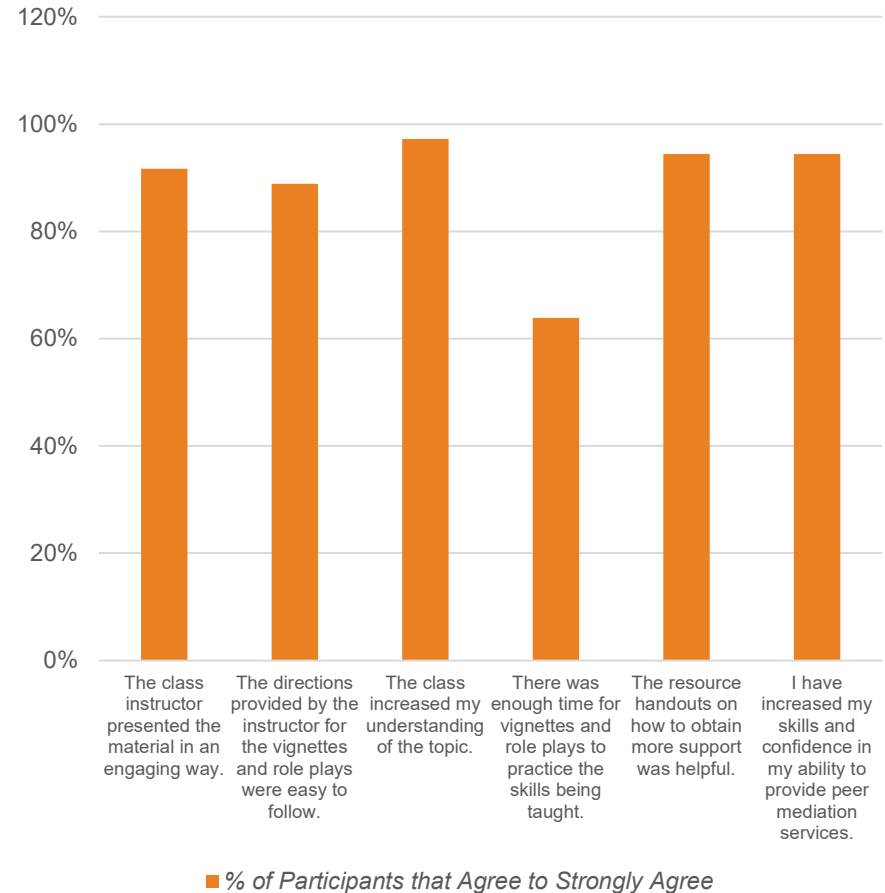


Peer Mediation Training Satisfaction Survey:

Of the skills presented in today's workshop, please indicate if you already use them, intend to use them as a result of today's class, or will not use them.



% of Participants that Agree to Strongly Agree



May

- 249 calls total of which 22% (56) became a case
- Top presenting issue – Psychological (representing 28% of all calls)
- 54% of all callers are between the age of 31 – 40 and 61-60
- 21% of calls came in between 5 pm and 8 am

External 24/7 EAP

(Data represents 5/1/2020 through 5/31/2021)

- 2,621 calls of which 894 became cases
- Highest call volume takes place between 8 am-5 pm
- Ethnicity Breakdown:
 - ✓ 21% - White
 - ✓ 16% - Asian
 - ✓ 14% - African American
 - ✓ 14% - Latinx
 - ✓ 2% - Filipino
- Age Breakdown:
 - ✓ 20-30 – 11%
 - ✓ 31-40 – 33%
 - ✓ 41-50 – 27%
 - ✓ 51-60 – 21%
 - ✓ 61+ - 8%

SFHSS Internal EAP

(Data represents 5/1/2020 through 5/31/2021)

Services

- 319 leadership consultations
- 845 individual consultations
- Responded to 23 critical incidents serving 352 individuals
- Took on 155 new cases

External 24/7 EAP + SFHSS Internal EAP:
Total Number of Calls, Cases and % Cases

