

SAN FRANCISCO HEALTH SERVICE SYSTEM

Affordable, Quality Benefits & Well-Being

MEMORANDUM

DATE: June 8, 2017
TO: Randy Scott, President, and Members of the Health Service Board
FROM: Mitchell Griggs, Acting Executive Director HSS
RE: June 2017 Board Report

HSS Personnel

- Two Benefits Analyst (1210) positions are posted to fill open positions
- 0923 – Communications Manager position is now vacant, will begin recruitment
- Offers have been made on two open 9910 Employee Well-Being Intern positions

Operations

- May inbound calls decreased 22% over 2016. Increase was due to high retirement volume. Customer service levels were met in May.
- Workflow optimization session started for Salesforce Users.
- Training initiative to create HSS Operations Team technology subject matter experts to provide ongoing support to Benefits Analysts.
- Retirement Season:
 - Have scheduled group Retirement Benefits Orientation sessions at HSS throughout June to alleviate 3rd floor lobby wait times.
 - Benefits analysts with expertise in Retirement applications are processing to ensure consistent quality and throughput.

Data Analytics

- 2018 system support, planning and configuration are underway.
 - PeopleSoft 9.2 self-service configuration training has been completed
 - Vision Buy-Up requirements have been documented and a meeting was held with People & Pay (eMerge) to assess the options and resource impacts
 - Member address file was transmitted to the vendor to get a jump start on cleaning up member addresses
 - A complete analysis of all the rates calculated was completed and recommendations were prepared to help simplify the coverage codes and rate combinations which must be supported
 - Configuration and testing of self-service is occurring in the development environment

Finance and Accounting

- Financial System Project (F\$P):
 - Preparing for early close of the FY 2016-17 and conversion to new financial system July 3, 2017
 - Participated in a review of separate modules of the new system
 - Ensuring reports from eMerge are designed to work with the new system
- Issued second reimbursement for \$15,000 to an active member for Adoption and Surrogacy Assistance Plan
- Began working with the Board of Supervisor's Budget Analyst on the review of the Mayor's Proposed FY 2017-18 and FY 2018-19 budget

Communications

- 36,173 website visits for the month of May 2017
- Completed PowerPoint, flyer, and handout templates for Employee Assistance Program (EAP)
- Designed and created campaign look and feel for EAP's We're Here For You campaign; Created 2 posters and 1 management flyer
- Designed and created campaign look and feel for EAP's We're Here For You campaign.
- Created 2 posters and 1 management flyer

Well-being

- Administered the first Well-Being@Work Grants. 18 Champions submitted 39 approved grant requests.
- Play Your Way launched in May and will finish on May 30. Many onsite activities have been offered at departments across the City as a result of this campaign in addition to the over 2000 challenge participants.
- 38 onsite activities were offered in April. 50% of these activities were offered by HSS staff. This is a 52% increase in activities compared to May 2016.
- EAP provided counseling to 56 clients in May. Participation in counseling so far in 2017 compared to 2016 represents a 14% increase in the number of hours and a 15% increase in the number of people counseled.
- EAP provided 23 organizational well-being services to 208 people in May. This represents a 16% decrease in the number of services compared to 2016 and a 54% increase in the number of people served. The majority of services were organizational consultations and trainings. The majority of people served attended orientations and trainings.

- The Wellness Center was officially named the Catherine Dodd Wellness Center on May 19, 2017. 106 members were in attendance and enjoyed the Well-Being Fair as part of the celebration. The Wellness Center has been open for three years.
- There were 647 visits to the Wellness Center in May, this is 94 fewer visits compared to May 2016. Participation may have dropped due to the short reporting period (May 1-24) or the dropping of two exercise classes due to lack of instructor availability.
- 374 visits (58%) were for group exercise. Due to lack of instructor availability, there were 7 fewer classes offered compared to April.
- In June, the Wellness Center will offer the Making Work, Work series, a new opportunity for members to learn meditation, the Back Safety training to prevent injury, and free coaching.

Directors Meetings/Presentations/Misc.

- Met weekly with Aon Hewitt
- Attended the Mayor's Department Head meeting
- Spoke at the Municipal Executive Association's annual membership dinner
- Met with Magellan Account Management to discuss interaction with HSS' EAP as well as possible provider performance measures
- Met with Kaiser Permanente Account Management to discuss interaction with HSS' EAP
- Participated in weekly calls with Blue Shield regarding Trio HMO implementation and communication strategy
- Participated in a combined B&T and Hills ACO management meeting with Blue Shield
- Attended Kaiser Permanente's Clinical Engagement session on C-Sections
- Met with VSP to determine vision buy-up enrollment needs
- Met with Mayor's policy and budget staff
- Attended Adaptive Business Leaders Oakland Round Table
- Review communications scope of work and pricing with potential communications vendors
- Toured FNTI (scanning vendor) facilities and GRM (record storage vendor) facilities
- Met weekly with HSS staff for open enrollment planning and development of self-service benefits 2017 pilot for open enrollment

Federal & State Update summarized by Lee Hagy Research Asst.

Directors Meetings/Presentations/Misc.

- Attended follow-up PBGH-led group call with stakeholders regarding the status of California State Senate Majority Leader Monning's Bill SB 538 (Hospital Contracts) in the State Assembly. Additionally, reached out to Senator Scott Wiener's office to urge a vote of support of passage of the bill in the Senate, in keeping with the Health Service System's history of advocating to eliminate anti-competitive hospital contracting provisions for employer-purchasers of healthcare.
- Met with Well-Being director and staff to discuss Retiree Needs Assessment research literature and next steps

Partnerships with other agencies

- Received update on meeting between HSS Well-Being staff and the Office of the Treasurer's Office of Financial Empowerment on future partnerships regarding financial well-being for Health Service System members.
- HSS staff, including the Administrative Services Manager and an EAP staff member, provided feedback that was passed on the Department of Human Resources regarding updating the Employee Handbook during a Focus Group meeting, and suggested ways that HSS and DHR can partner together to use the revised Employee Handbook to communicate employee benefits, including well-being programs and EAP services, to members.

California Health Insurance Legislation Update

SB538 (Hospital Contracts – Senator Monning) Passes Senate and Advances to Assembly

On May 31, 2017, SB 538, prohibiting anti-competitive hospital contracting terms, advanced in the State Senate by a vote of 22-9. A vote within the Assembly is anticipated for June. SB 538 seeks to level the playing field in health care contracting by preventing dominant provider systems from engaging in five coercive and unfair practices: 1) Requiring "all or nothing" terms that force health plans to contract with all affiliates of a hospital group regardless of performance; 2) Forcing employers to be bound by undisclosed terms of a contract between a hospital and health plan; 3) Mandating that payers bring anti-trust claims on terms exceedingly favorable to the dominant provider group; 4) Requiring that a health plan provide coverage to its enrollees at the same level of copayment, coinsurance or deductible regardless of underlying value; and, 5) Requiring that rates be kept secret from parties that are or will become liable for payment.

Federal Update

U.S. Senate Passes Federal Budget Extension to September; Trump Expected To Approve

By a vote of 79-18, the U.S. Senate voted May 4, 2017 to approve a \$1.1 trillion spending bill to fund the government through September, preventing a government shutdown, but more work will need to be done in the coming months to fund Fiscal Year 2018 before October. President Trump is expected to sign this measure in May 2017 (Snell, Washington Post, May 4, 2017).

May 24, 2017: Congressional Budget Office (CBO) issues analysis of American health care Act (AHCA) To Repeal and Replace Affordable Care Act

The CBO Report (available at <https://www.cbo.gov/publication/52752>) estimates that enacting the American Health Care Act would reduce federal deficits by \$119 billion over the coming decade and increase the number of people who are uninsured by 23 million in 2026 relative to current law.

The CBO estimates that about 88 million people—or one in three younger than 65—live in states that are likely to waive the 10 mandated health benefits, allowing people to buy cheaper policies but with less coverage. The analysis also estimates that 44 million people—one in six of us—live in states that could waive both requirements, allowing less comprehensive coverage and more expensive policies for sick people. (Rosato, Consumer Reports, May 30, 2017).

As noted by the Society of Human Resource Management, the key issues of interest to the HR profession within the AHCA are the following:

- **Elimination of Minimum Essential Coverage ACA Penalty for failure to have insurance coverage**, with possible follow-up regulatory changes to reduce 1095 reporting and notification requirements to the IRS
- **Delaying the “Cadillac tax” on employer plans to 2026 and end other ACA taxes on employers, including the Health Insurance Tax (HIT)**
- **Repealing the annual limits on Flexible Spending Accounts (FSAs) and permitting their use to reimburse over-the-counter medications**
- **Lowering the tax rate on Health Savings Accounts (HSAs) distributions to 10 percent and allowing individuals to use HSA funds for over-the-counter medicine**

As of today, the Affordable Care Act remains in place, including the paying of cost subsidies to support health care exchanges, despite a U.S. House of Representatives lawsuit challenging the constitutionality of Obamacare cost-sharing subsidies.

However, on Monday May 22, 2017, the Trump administration asked a federal court to further hold a ruling on cost-sharing subsidies an additional 90 days, leaving billions of dollars in payments to insurers up in the air for 2017 and 2018. In a joint filing with the U.S. House of Representatives submitted to the U.S. Court of Appeals for the District of Columbia Circuit, the administration and Republican lawmakers asked for a second 90-day extension. The two sides said they wanted more time because they were discussing measures that would no longer require a judicial decision, including the new healthcare legislation. (Hurley and Abutaleb, Reuters, May 22, 2017).

2015 DMHC Timely Access report:

In a prior Health Service Board meeting, Commissioner Follansbee requested that the carriers respond to the [2015 DMHC Timely Access report](#). Vendors were asked to prepare a written statement to be included in the Director's Report.

Kaiser Permanente response:

Kaiser Permanente is pleased in our overall performance in the DMHC's Measurement Year 2015 Timely Access report. The single finding noted by the DMHC in reference to Kaiser Permanente's reporting of "Lines of Business" was reviewed and investigated. Through both internal assessments and consultation with the DMHC's Office of Plan Monitoring, Division of Provider Networks, we retrospectively identified certain misclassified Medi-Cal plan partner relationships. To correct this issue and to ensure that this administrative reporting issue is not repeated, Kaiser Permanente contacted each of our Medi-Cal plan partners to confirm the reported relationships, DMHC Health Plan IDs, and provider networks are accurate.

Blue Shield of California response:

While health plans began filing TAR reports in 2012, this year was DMHC's first time conducting timely access review under SB 964, a 2014 bill that requires DMHC to annually review health plan compliance with timely access standards and to post its final findings from the review on its website.

Virtually every health plan in California was called out for errors. Blue Shield was identified as having two errors, the first being "did not separate data by line of business." This was apparently because Blue Shield categorized some providers as "Commercial/Medicare." DMHC asked Blue Shield to remove the reference to Medicare so that providers only showed as "Commercial." This was done and the DMHC did not have any additional concerns about the first error. The second alleged error was "submitted data for PCPs not in Plan." Blue Shield was never provided information from the DMHC's review in order to assess the relevance or accuracy of this finding, but remains committed to working with DMHC in order to continue fulfilling its regulatory obligations.

Indeed, Blue Shield is cooperating with DMHC on the Measurement Year 2016 submission of the next report, for which roster data was submitted March 31, 2017, and for which compliance documentation and survey results are due May 26, 2017, for all health plans. Blue Shield is fully up-to-date with all TAR-related submissions to DMHC.

UnitedHealthcare response – Active/Early Retiree:

UnitedHealthcare of California is taking all necessary steps to ensure we are compliant with TAR/Network Adequacy Requirements, including working with the DMHC to finalize outstanding issues from the MY2015 Report.

UnitedHealthcare response – Medicare Retiree:

UnitedHealthcare administers our plan designs in compliance with applicable federal and state mandates, however as Medicare Advantage Plans are federally regulated products governed by the mandates promulgated by the Centers for Medicare and Medicaid Services (CMS), most state mandates governing operation of the plan are preempted by federal law. We are routinely audited by CMS for compliance, and it is our intent at all times to comply with all applicable laws and regulations.

Nutrition coverage;

In the April 13, 2017 meeting, Commissioner Breslin asked about current coverage for nutrition counseling and any coverage changes planned. Responses from all three medical plans were gathered.

Kaiser Permanente response: Nutrition counseling services are covered under the Health Education benefit. All plans include coverage for Health Education. Specifically regarding nutrition, these topics are covered:

- Diabetes management
- Perinatal: Exercise/Nutrition
- Weight/Exercise/Nutrition Overview (single session)

Note: Weight loss programs (e.g., Optifast, Weight Watchers) and weight loss products, including food are not covered.

Blue Shield of California response: Under the Preventive Services benefit there are no out of pocket costs for members to talk to their doctor and receive behavioral counseling related to Healthy Diet, Physical Activity, and Obesity. Please see the attached Prevention guide with references to nutritional counseling throughout.

Under Diabetes Prevention Program, see attached flyer, members who qualify receive nutritional counseling as part of the program, and this is a requirement per the CDC Curriculum and below is a link to the CDC Curriculum

site: <https://www.cdc.gov/diabetes/prevention/lifestyle-program/curriculum.html>

UnitedHealthcare response – Active/Early Retiree: UnitedHealthcare offers several resources for nutritional counseling:

1. Diabetes self-management training includes medical nutrition therapy services.
2. The “Healthy Pregnancy Program” offers a phone call from a care coordinator 4 weeks postpartum that includes information on nutrition. Nutritional Counseling is covered at 85% after the annual deductible for services related to diabetes education. Members can register for Healthy Pregnancy through MyUHC.com. Members can only access nutritional counseling through their Medical Benefits, and providers can be found at MyUHC.com. Only covered as related to Diabetes Education.
3. Rally, which is available to all UHC members, has information on eating healthy. When members log in online or through the Mobile App, they can set up missions for themselves, including Eating until Full, Incorporating Fruits and Vegetables, and Eating Mindfully. Users can mark each mission complete once a day and earn Rally Coins. There is also a lot of Health Weight and Nutrition information at www.uhc.com/health-and-wellness including articles on current topics, recipes including quick and healthy options, and online seminars on many and varied topics.
4. For 2018, UnitedHealthcare will offer the Real Appeal Program which includes:
 - a. A personalized transformation coach for an entire year for members who qualify for the program

Online Virtual Coaches guide participants through the program, step by step, customizing it to fit their needs, personal preferences, goals and medical history. Classes can be attended on the computer or on the mobile app.

- b. 24/7 online support and mobile app.

Staying accountable to goals is easier than ever with:

- Customizable food, activity, weight and goal trackers.
- Unlimited access to digital content, including streaming workout videos.
- Success group support which lets participants chat with others who are doing the Real Appeal program.
- The weekly Real Appeal All-Star Show featuring healthy tips from celebrities, athletes and health experts.
- Weekly analysis, feedback and goal reporting.

c. A Success Kit.

All the gadgets participants need to help kick-start their weight loss and keep them going strong will be delivered to their door after they attend their first group coaching session. It includes these helpful tools:

- Personal blender
- Digital food scale
- Measuring cups and spoons
- “Perfect” portion plate
- Resistance band
- Pedometer
- Real Appeal water bottle
- Electronic body weight scale
- Body tape measure
- Exercise DVDs

Real Appeal is provided at no additional cost to employees as part of their benefit plan. It teaches participants how to eat healthy and be active – without turning their lives upside down.

UnitedHealthcare response – Medicare Retiree:

In general, dietary counseling and weight reduction programs are excluded benefits under the MAPD plan. Below are related programs for members who meet specific eligibility requirements.

Medical Nutrition Therapy

Covered at \$0 cost share for beneficiaries eligible for Medicare-covered medical nutrition therapy services.

This benefit is for people with diabetes, renal (kidney) disease (but not on dialysis), or after a kidney transplant when ordered by the member’s doctor.

UHC covers three hours of one-on-one counseling services during the first year that members receive medical nutrition therapy services under Medicare (this includes this plan, any other Medicare Advantage plan, or Original Medicare), and two hours each year after that. If the condition, treatment, or diagnosis changes, members may be able to receive more hours of treatment with a physician’s order. A physician must prescribe these services and renew their order yearly if the member’s treatment is needed into the next plan year.

Obesity screening and therapy to promote sustained weight loss

Covered at \$0 cost share for eligible members.

If members have a body mass index of 30 or more, UHC covers intensive counseling to help members lose weight. This counseling is covered if members receive it in a primary care setting, where it can be coordinated with a member's comprehensive prevention plan. Members can talk to their primary care doctor or practitioner to find out more.

Real Appeal

For 2018, UnitedHealthcare will offer the Real Appeal Program which includes:

\$0 cost for eligible members with a BMI of 23-29 with a comorbid condition or 30+ BMI.

With Real Appeal members receive personalized, individualized support and professional coaching for a full year, online and on a smart phone:

- Personalized weight loss coaching - step-by-step guidance customized to a member's needs
- Online tools and all-star support - group chats and a weekly video show featuring celebrities
- A Success Kit of useful resources - including nutrition tips, fitness guides and recipes

Director's Report

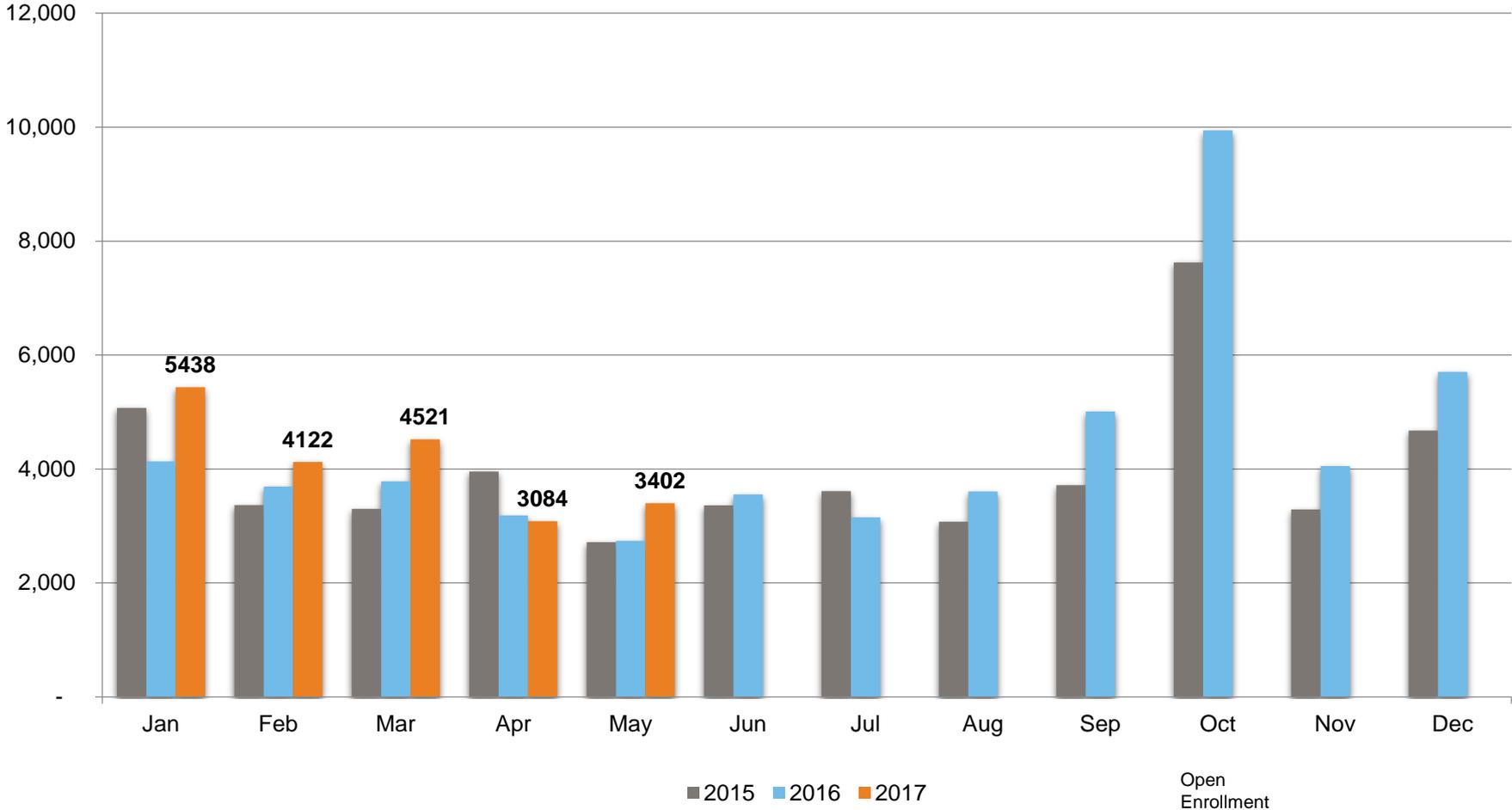
OPERATIONS UPDATE | June 2017

Calls and Office Visits: May 2017

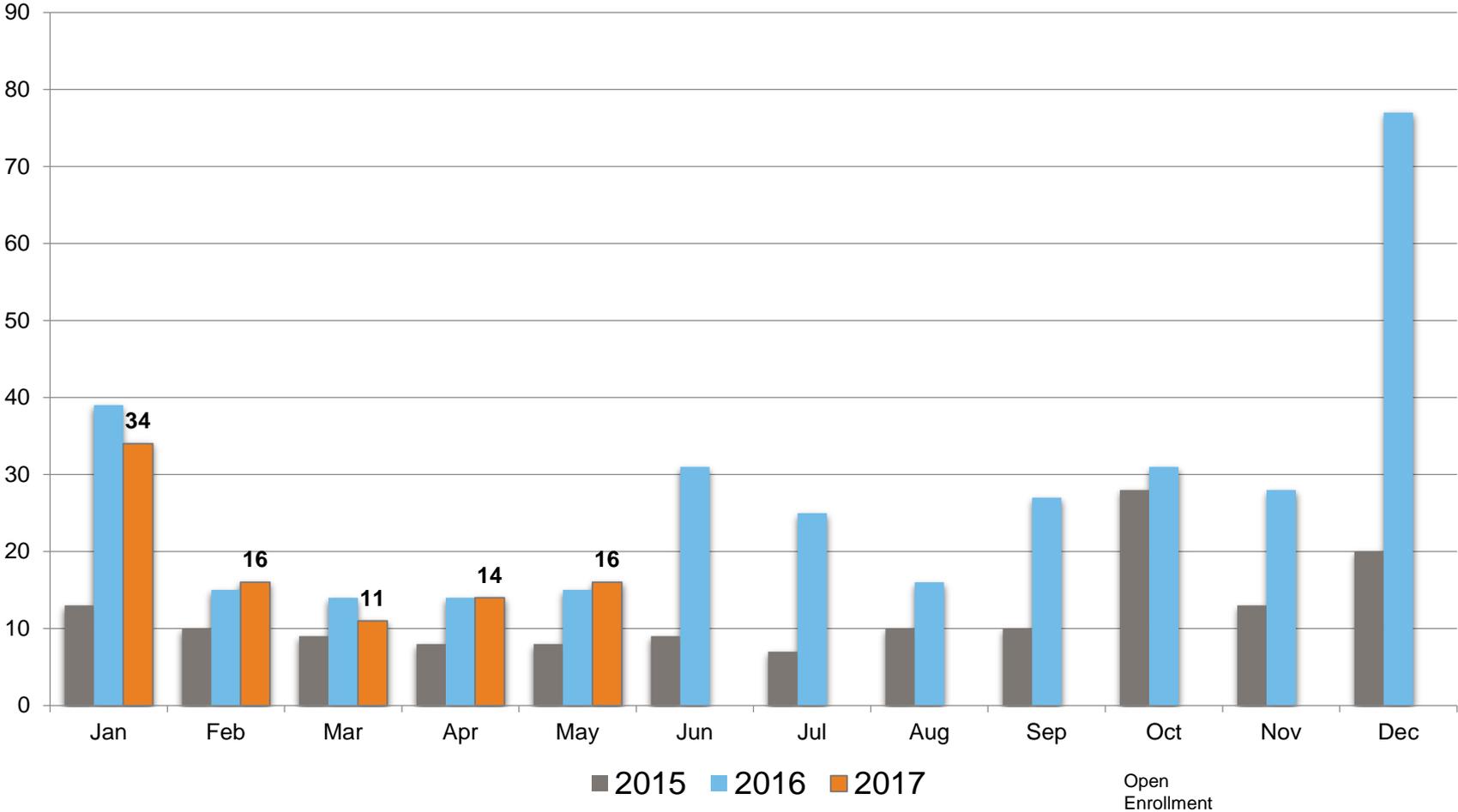
Calls and In-person Assistance total:

- Inbound calls: 3,402 answered calls (24.2% ↑ from 2016)
- Speed of answer: 16 seconds (6.7% ↑ from 2016)
- Abandonment rate: 0.8% (28 calls)
- In-person assistance: 1,359 members (12% ↑ from 2016)

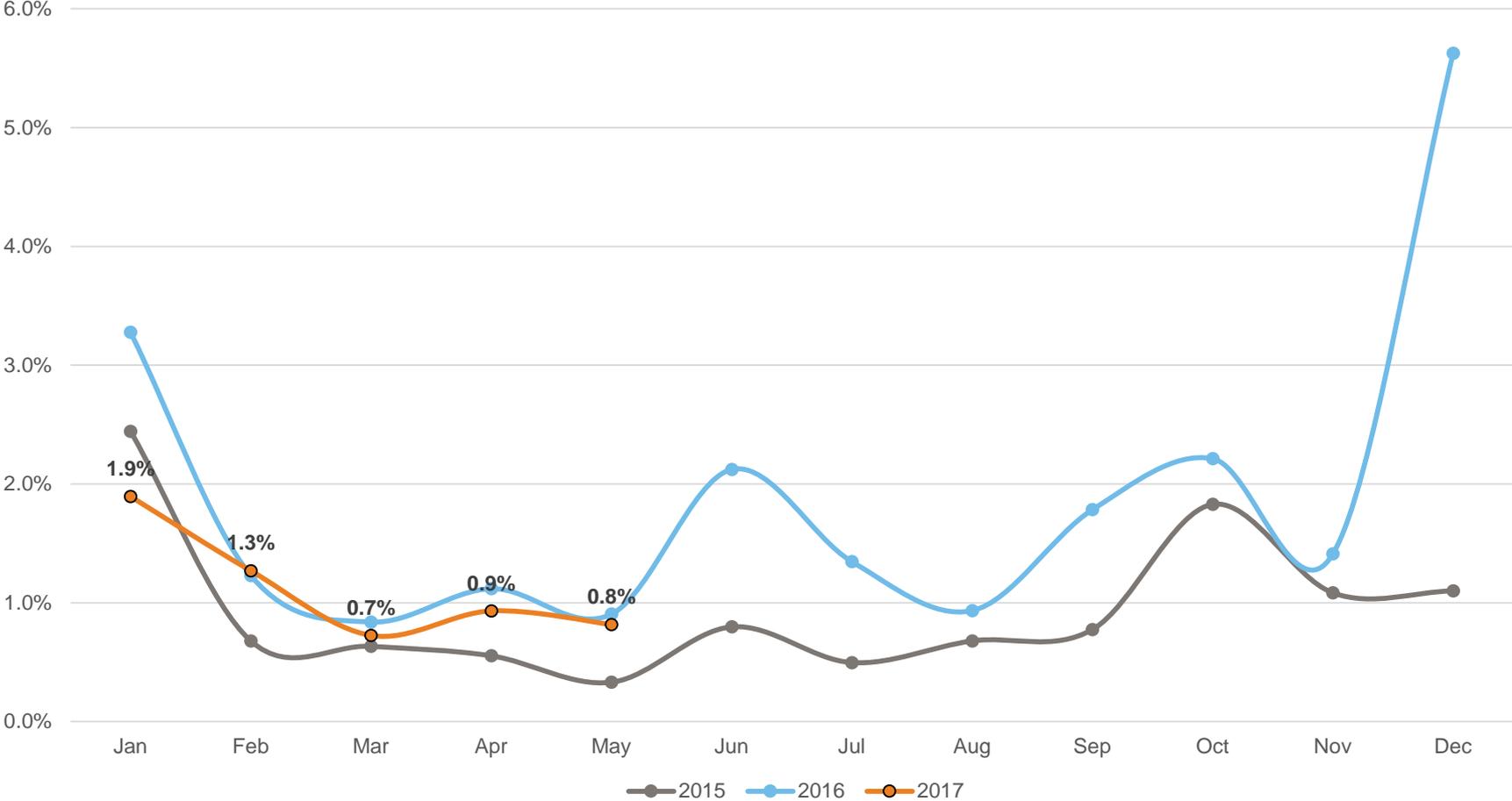
Inbound Calls: May 2017



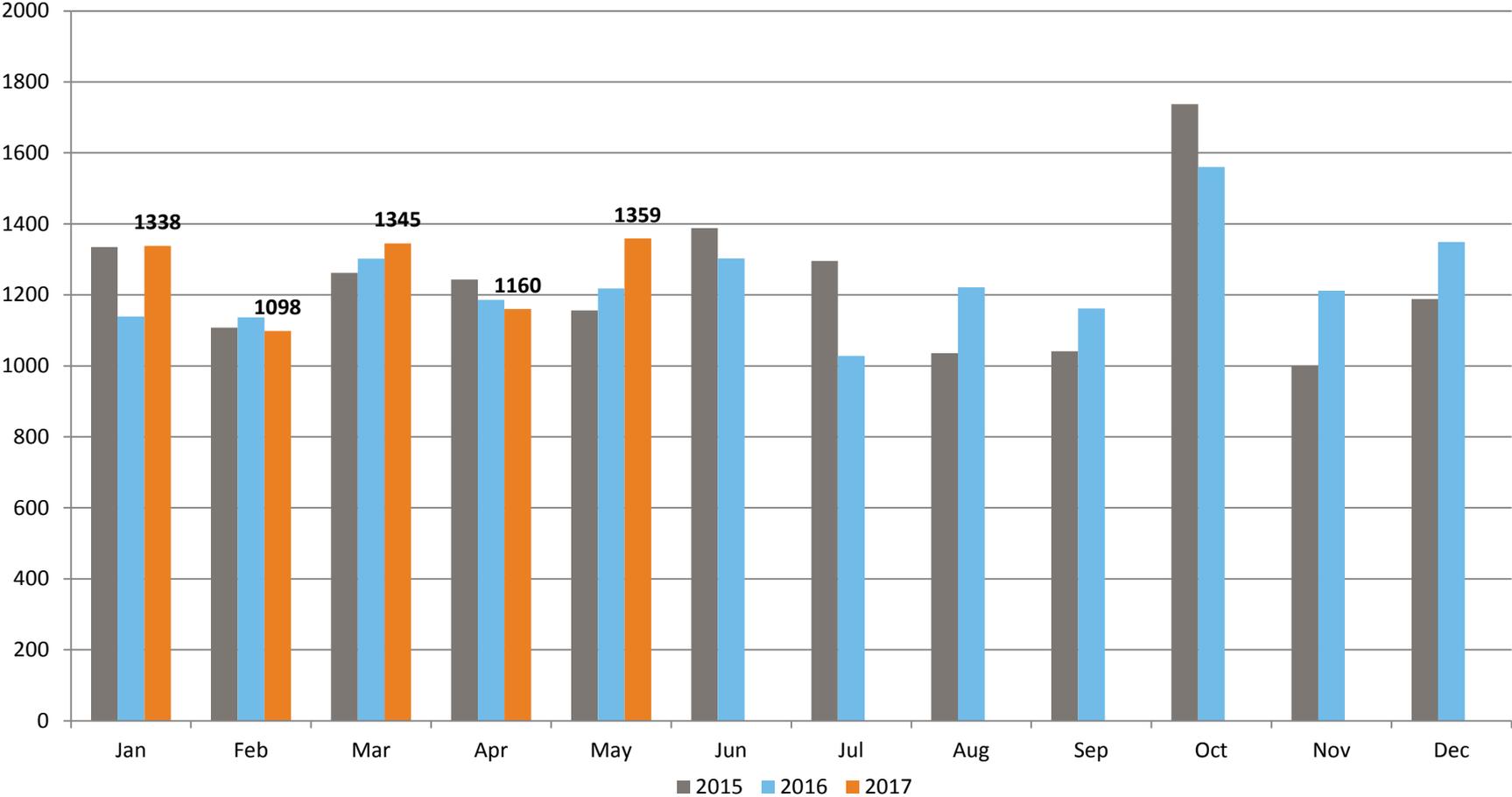
Average Speed of Answer: May 2017



Abandonment Rate: May 2017



In-person Assistance: May 2017



Delinquencies & Terminations: May 2017

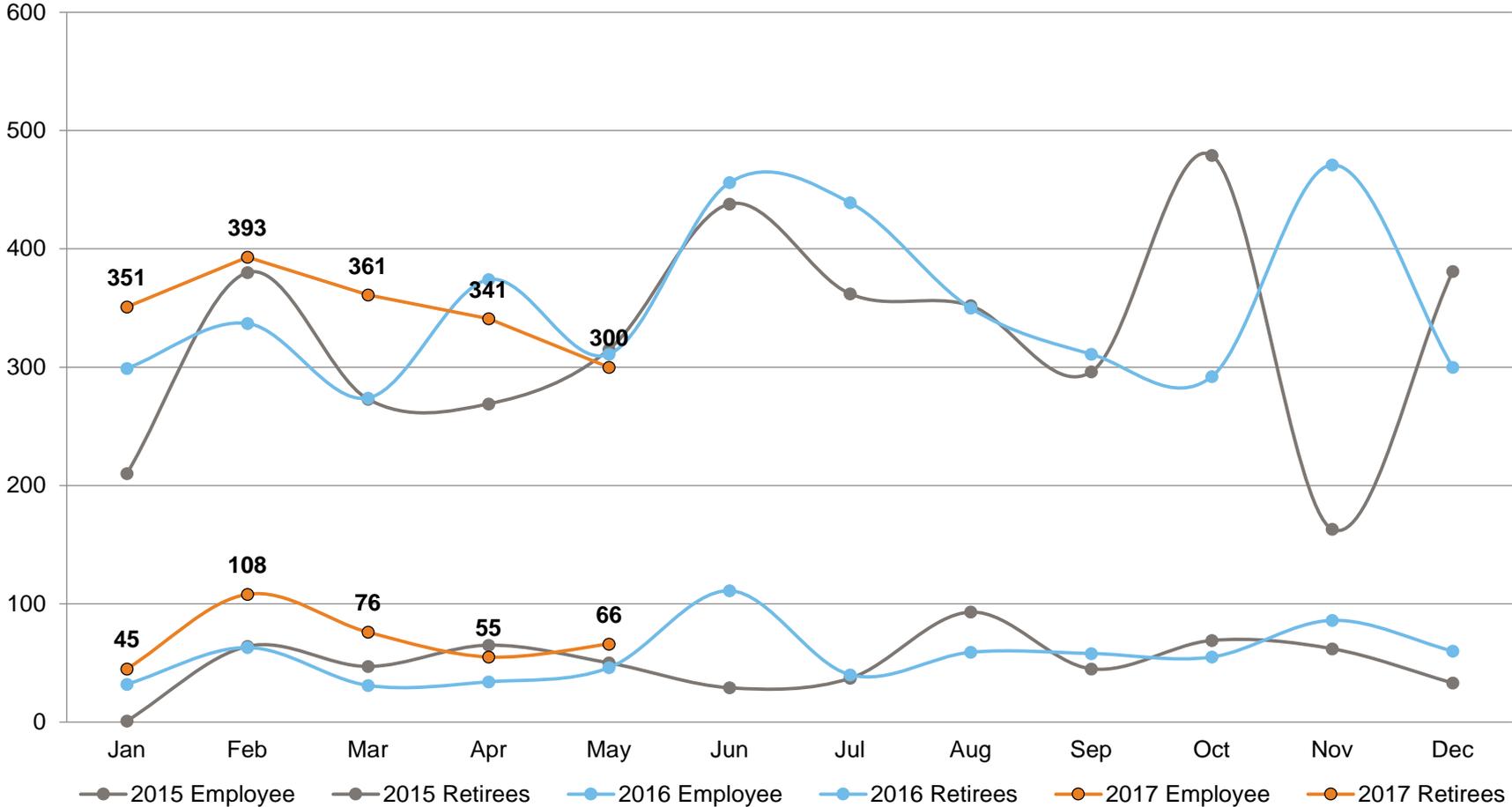
Delinquency Notices Sent.

- Employees: 300
- Retirees: 66

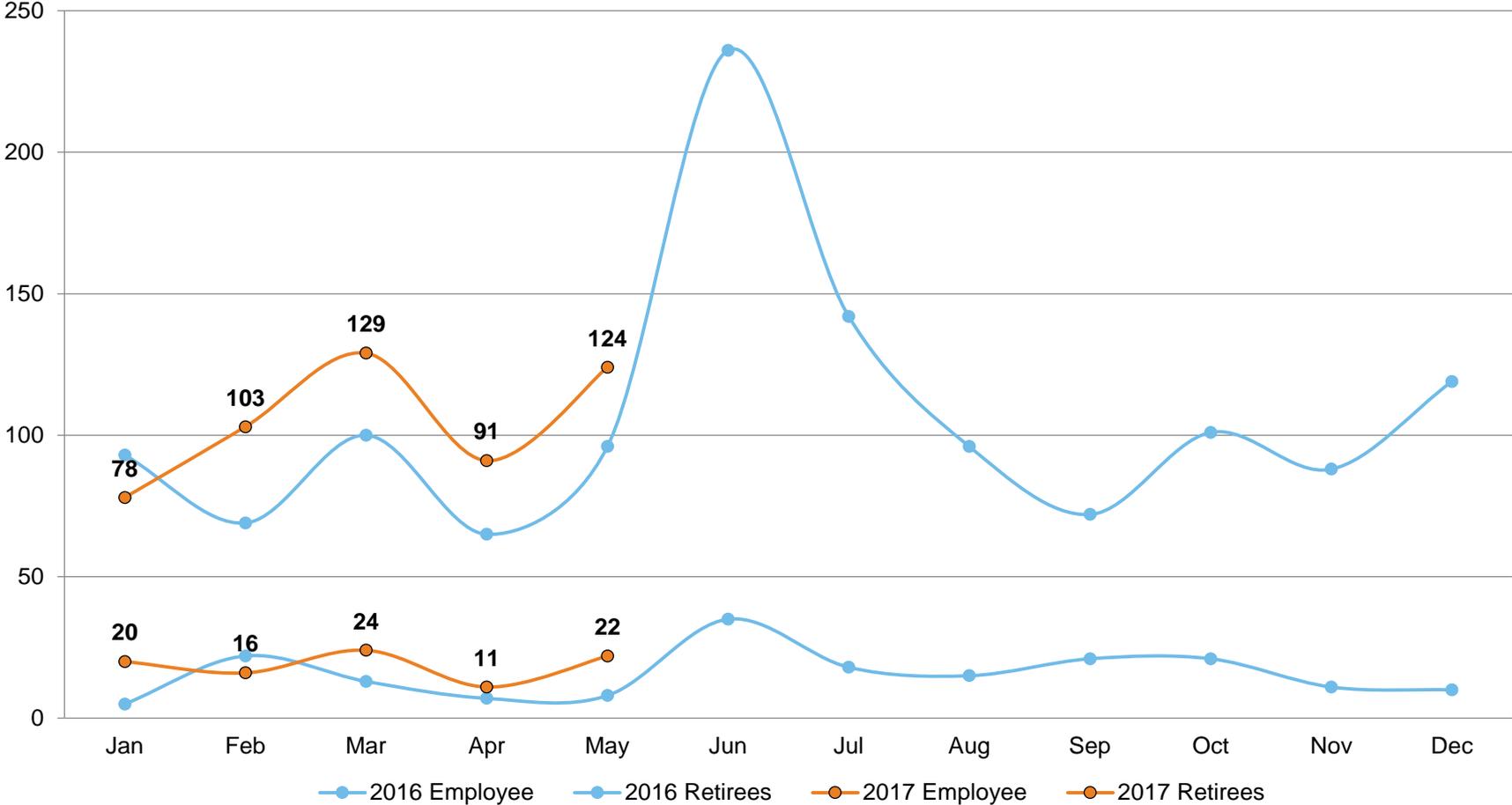
Termination Notices Sent.

- Employees: 124
- Retirees: 22

Delinquency Notices: May 2017



Termination Notices: May 2017



Data Analytics Management Report

June 8, 2017

PEOPLESOFT / BENEFITS ADMINISTRATION SYSTEM:

- Continued system remediation from 2017 split carrier implementation:
 - Testing modifications to the Truven outbound eligibility file
 - In development changes required for 1099's
 - Testing change to UHC Medical program to resolve issue with member record missing for dependent termination (when member moves from City Plan to UHC Medicare Advantage PPO (New City Plan))

- System modifications for 2018 plan year underway
 - Documented vision-buy up system requirements and options
 - Completed PeopleSoft 9.2 self-service configuration training
 - Configuring and testing of self-service workflows

- Documented requirements to remove specific rate ID selection criteria from Delta Dental Retiree Payment program. Some benefit programs were being incorrectly excluded

PEOPLESOFT / BENEFITS ADMINISTRATION SYSTEM:

- Documented schedule of tasks necessary for F\$P go-live July 1
- Provided annual Group Life/ LTD census for Aetna
- Discovered and reported PeopleSoft Payroll deletion of 9 deduction codes required for benefits for Superior Court employees. Issue was escalated and remediated in time for payroll processing
- Provided updated disabled adult dependent data to Member Services
- Developed FSA audit query for Member Services
- Prepared and transmitted member address file to mail house vendor for biannual member address clean-up

Data Analytics

- Fulfilled ad-hoc report requests utilizing All Payer Claims Database (APCD):
 - Blue Shield member analysis
 - Well-Being assessment for 311 Department
 - Extract and analysis of data to inform a Simple Therapy pilot

- Conducting User Acceptance Testing (UAT) on modifications to the Truven outbound eligibility file

- Attended Truven Health Analytics / IBM Watson Health conference

- Prepared analysis and recommendations for streamlining rate calculations and system configuration for the 2018 plan year

IT INITIATIVES

File Room Digitization:

- Investigating additional assets needing digitization. Working with Contracts Division to amend contract

Open Enrollment (OE) for 2018 plan year:

- Planning phase for OE mailing collateral design and execution
- Continued refining schedule and dependencies of OE tasks
- Working with architect and HSS leadership for on redesign of lobby to support self-service benefits
- Continue research of software and hardware kiosk solutions

Myhss.org:

- Conducted various maintenance activities for the web site:
 - Migrated code for new well-being campaign
 - Posted all materials for Health Service Board meeting
 - Scored Request for Quote (RFQ) response for web redesign and hosting in a Drupal platform

IT INITIATIVES

Enterprise Content Management (ECM) System:

- Configuring and testing of email agent to allow for content to be directly emailed into the ECM. Goal is a pilot test with SFUSD

Cyber Security:

- Attended monthly Multi-State Information Sharing & Analysis Center (MS-ISAC) webcast on 5/30
- Performed anti-virus server upgrade and ensured all HSS systems were protected from WannaCry ransomware

Miscellaneous:

- In collaboration with Finance division, met with Coalfire (vendor engaged by Controller's office) to discuss HSS Payment Card Industry (PCI) compliance
- Purchase Order has now been released for new marketing / communication software tool (Emma) which HSS will utilize. Implementation will begin in June
- Met with Department of Technology to prepare for migration of data center



Communication Management Report

June 08, 2017

Vendor Management

- Reviewed final pieces of Better Every Day campaign and launched stories webpage in collaboration with Barretto Co.
- Worked with print vendors on selecting proper paper and sizing to create multiple quotes for upcoming Well-Being campaigns and materials
- Oversaw Citizen Group in the design component of Well-Being's upcoming nutrition campaign

Website

- 36173 website visits for the month of May 2017
- Troubleshoot and launched Play Your Way stories & winners page: <http://myhss.org/well-being/playyourwaystories.html>
- Launch of Better Every Day stories page: <http://myhss.org/well-being/stories.html>

Graphic Design

- Completed Powerpoint, flyer, and handout templates for Employee Assistance Program (EAP)
- Designed and created campaign look and feel for EAP's We're Here For You campaign.
 - Created 2 posters and 1 management flyer
- Layout of Wellness Center June activity and event calendar
- Reformat & re-design of finance Mayor's Budget presentation
- Began layout and design of EAP 101 informative packet

Finance and Contracting Activities Update

Finance and Accounting

- Financial System Project (F\$P):
 - Preparing for early close of the FY 2016-17 and conversion to new financial system July 3, 2017
 - Submitted Role Mapping – Phase 3 for all the users of the new system
 - Participating in a review of separate modules of the new system
 - Ensuring reports from eMerge are designed to work with the new system
- Issued second reimbursement for \$15,000 to an active member for Adoption and Surrogacy Assistance Plan
- Began working with the Board of Supervisor's Budget Analyst on the review of the Mayor's Proposed FY 2017-18 and FY 2018-19 budget

Finance and Contracting Activities Update

Contracting and Vendor Management

- Drupal Custom Website RFQ:
 - Initiating negotiations with the highest ranked Proposers for the Drupal Custom Website
- Mail House Vendor RFQ:
 - Mail House RFQ Complete, Vendor selection being evaluated by HSS Management
- Print Vendor RFQ:
 - Print Vendor RFQ Complete, Vendor selection being evaluated by HSS Management
- Completed renewal and procurement of Salesforce Software Licenses for the CRM system
- Fully Executed Agreement with In Wave Group for professional services for Promoting Well-Being for Leaders Workshops.

WELL-BEING MONTHLY REPORT

MAY 2017 REPORT*

Provided at the June, 2017 Health Service Board Meeting

*Note: The data in this report reflects May 1-23, 2017.

Well-Being@Work Update: April

- Department Lead Recruitment
 - 27 Departments have Leads
- Champion Recruitment
 - Currently there are 155 Champions (+2 compared to April)
- Grants
 - The first-ever Well-Being@Work Grants were provided
 - 18 Champions submitted 39 approved grant requests
- Awards
 - 14 departments have Award plans for 2017

Play Your Way (PYW) Activities

Champion-led Activities:

- Department on Status of Women did a workplace scavenger hunt each week
- SF Department of Public Works promoted sneaker week and Champion led contests at the workplace
- Mayor's Office on Disability had an exercise egg hunt to launch their PYW workplace activities
- Department on Environment implemented Instant Recess (10-minute break twice a week) led by Champions
- Multiple departments hosted PYW launch events and invited HSS to provide a stretch break at staff meetings



Onsite (Departments) Activities Update

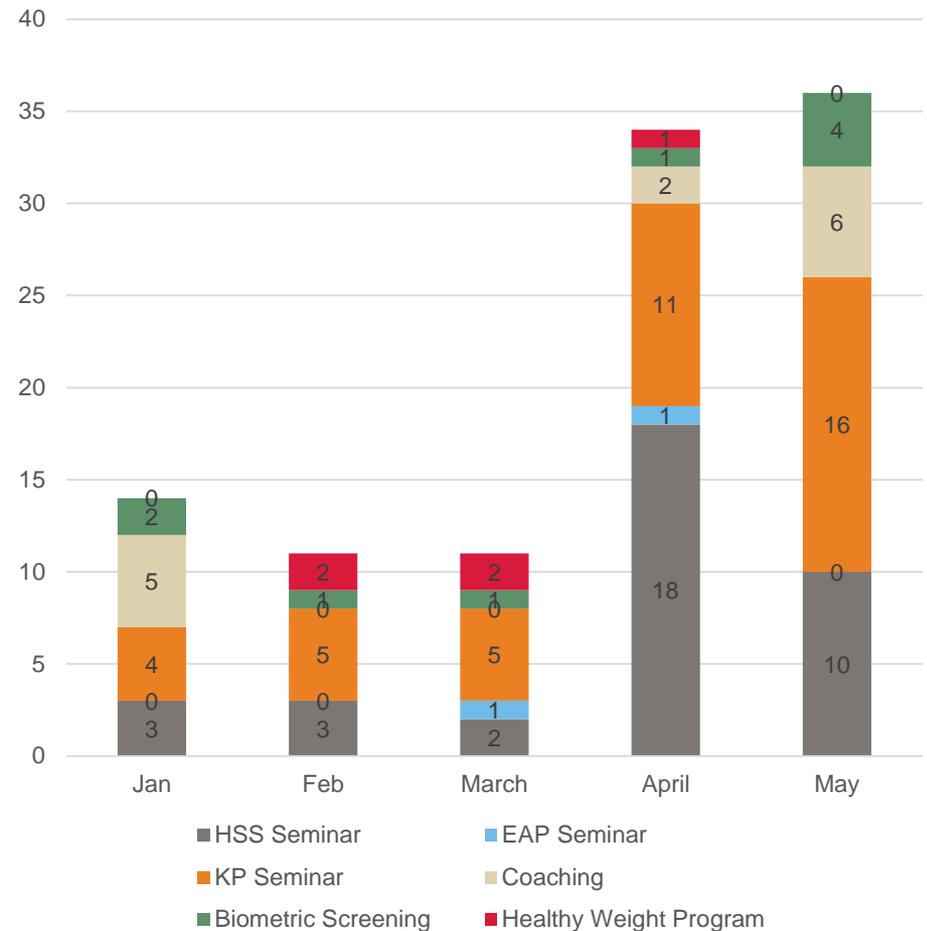
May : Number of onsite activities

- 38 (108 YTD)
- 50% of activities provided by HSS staff
- Coaching requests increased as Healthy Weight Programs end to maintain momentum
- Completion of 1 Healthy Weight Program on May 25 with 78% retention

May 2017 Compared to 2016

- 52% increase in onsite activities
- Attributed to Play your Way campaign promotion

2017 Onsite Well-Being Activities



Employee Assistance Program: Organizational Well-Being

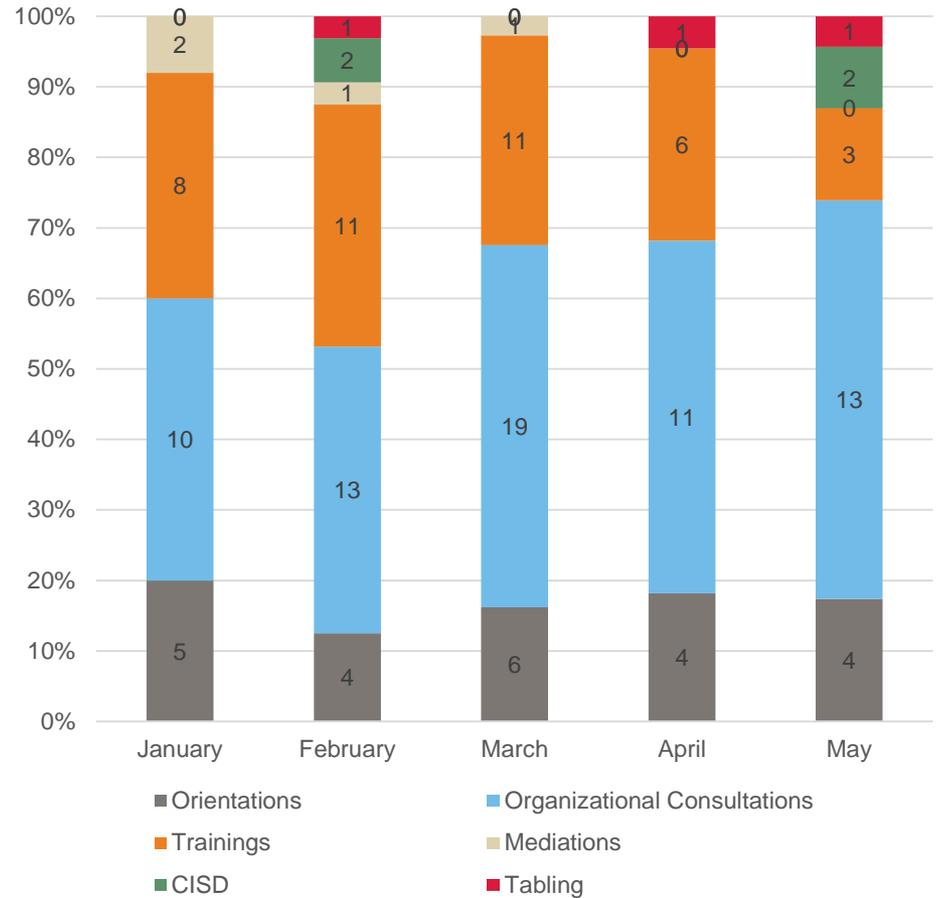
May (reporting to 5/23/17)
Organizational Services

- 23 organizational services (142 YTD)
 - 57% were organizational consultations
 - 13% were trainings

Comparison to 2016 YTD (169):

- 16% decrease in organizational services provided

Number and Percentage of Organizational Services by Type and Month: YTD 2017



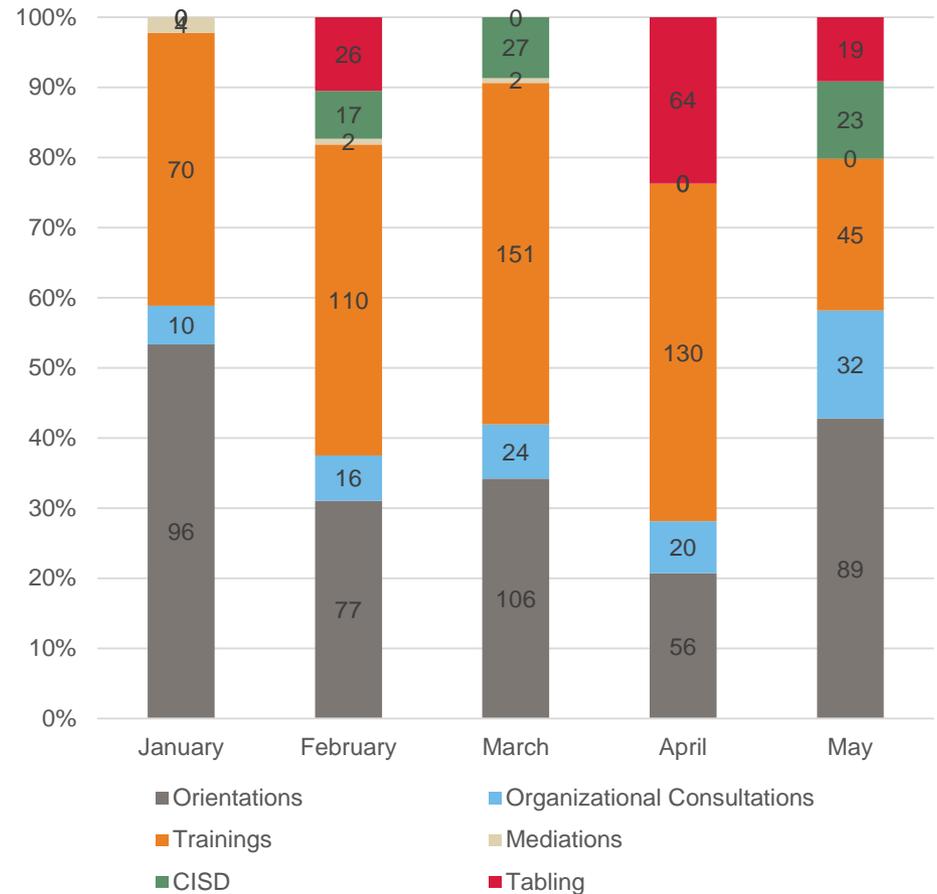
Employee Assistance Program: Organizational Well-Being

May (reporting to 5/23/17) Organizational Services

- 208 people served by these services (1217 YTD)
 - 43% of people served attended orientations
 - 22% of people served attended trainings

- Comparison to 2016 YTD (792):
- 54% increase in people served

Number and Percentage of Ogranizational Services by Type and Month: YTD 2017



Employee Assistance Program: Counseling Update

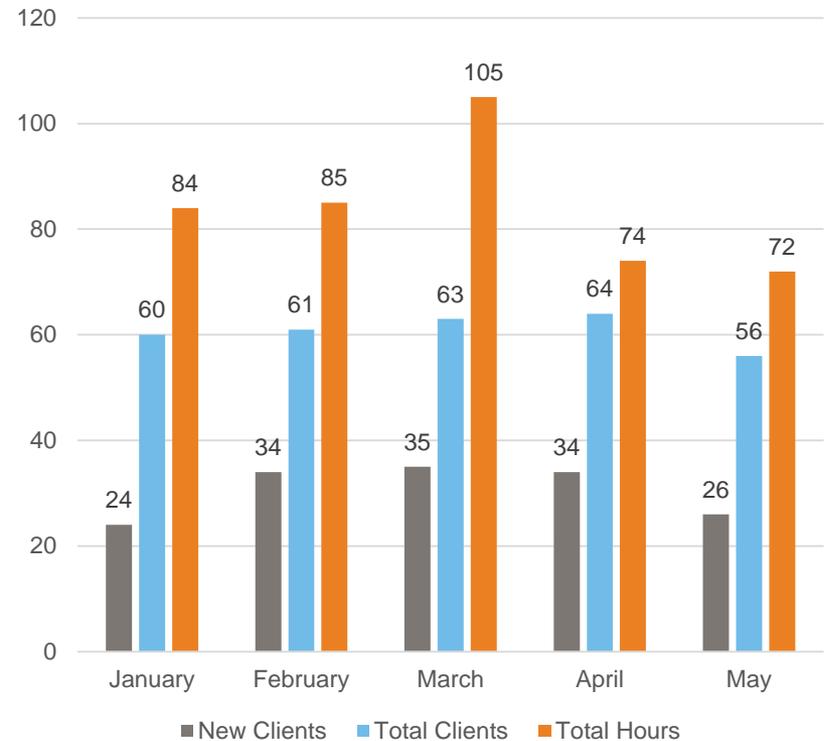
In May 2017 (reporting to 5/23/17)
EAP provided:

- 72 hours of counseling
- Served 56 clients
- 26 new clients

Comparison to 2016 YTD:

- 14% increase in New Clients
- 15% increase in Total Clients
- 14% increase in Total Hours of Service

EAP Clinical Services: YTD 2017

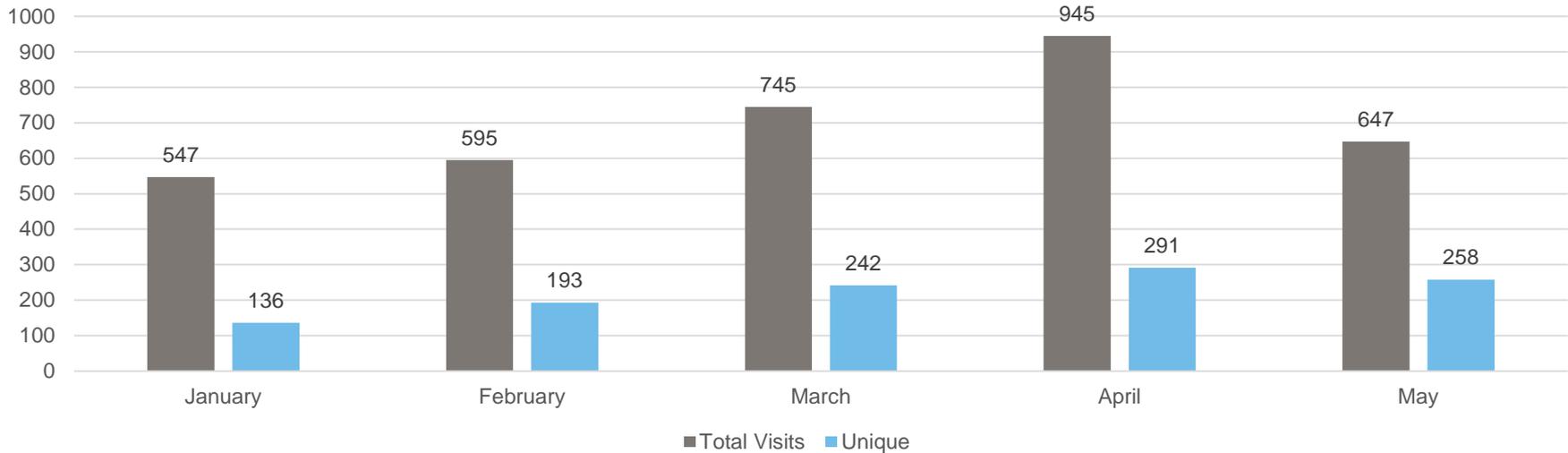


Employee Assistance Program: Project Updates

- We're Here For You campaign; promotion of EAP services for employees and supervisors complete. Materials will be promoted through Champions, HR professionals, and department leadership starting in June.
- Managing For Success seminar series for supervisors and managers; TKI assessment tool chosen, content being written, dates for pilot established, will launch in June.
- How to Access Mental Health Benefits project; met with Kaiser and Blue Shield/Magellan to discuss processes for addressing service concerns.

Wellness Center – Participation

Wellness Center: Total and Unique Participation by Month

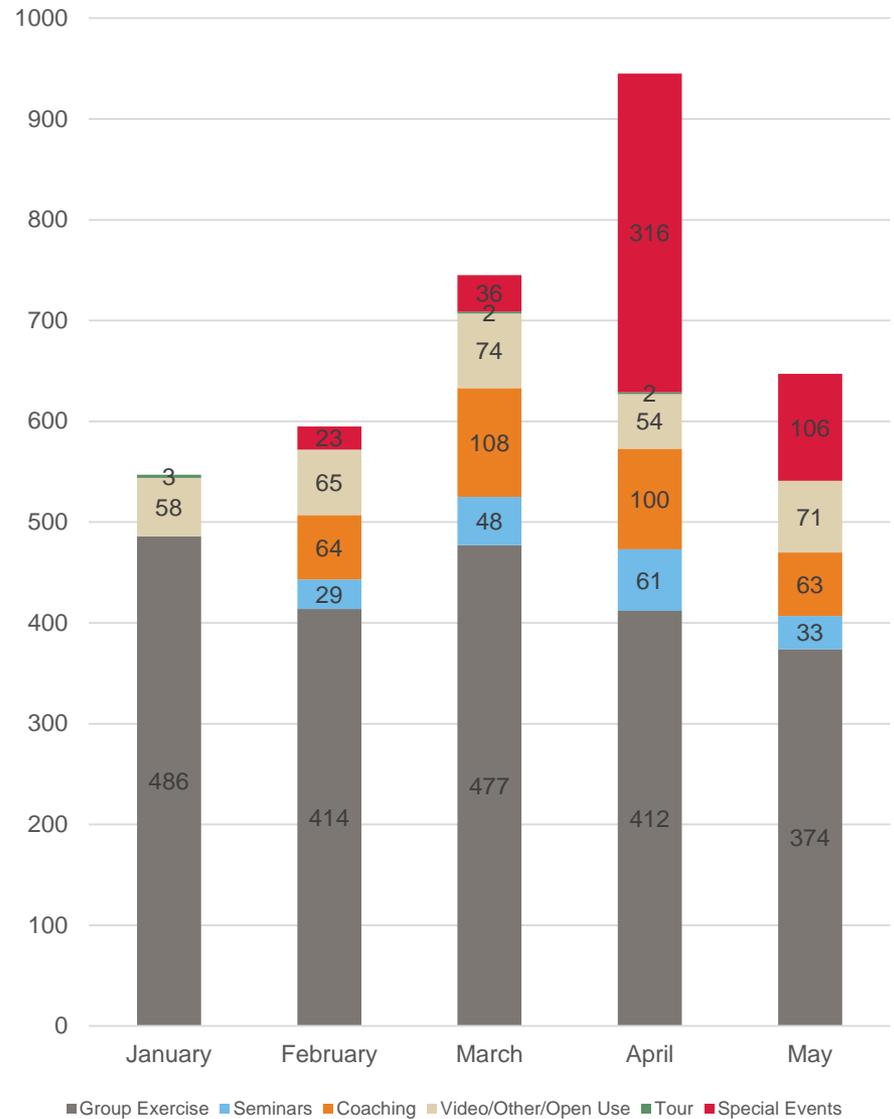


- There was a total participation of 647 visits and 258 individuals who visited the Wellness Center for May 2017. This is a decrease of 94 visits when compared to May 2016. This decrease may directly related to reporting a shorter month, having to cancel 2 regular group exercise classes and a smaller number of onsite seminars being offered.

Wellness Center – Visits by Type by Month

Total visits by offering for May:

- Group Exercise – 374
- Special Events – 106
- Coaching - 63
- Video/Open Use/ Other – 71
- Seminars – 33
- Facility Tours - 0

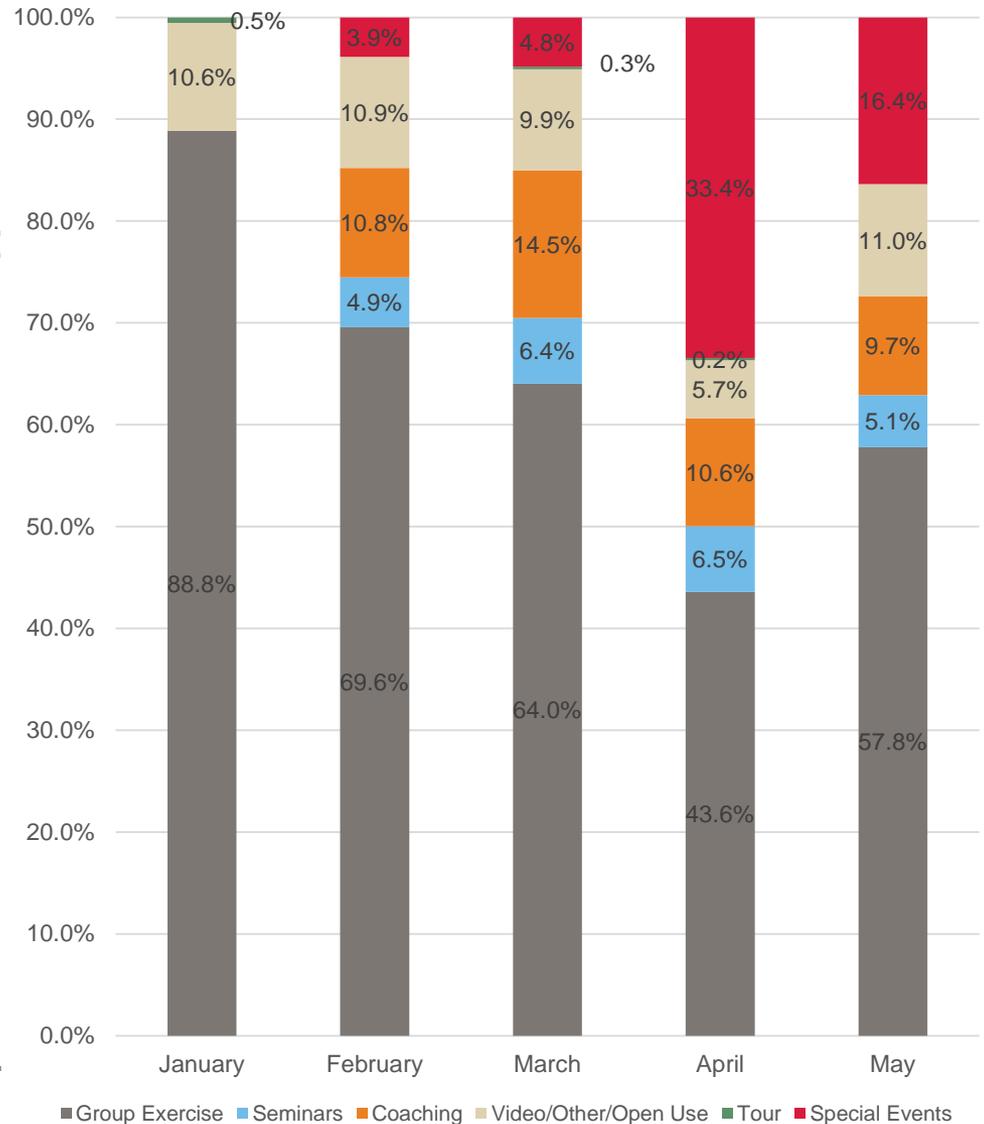


Wellness Center - % of Visits by Type by Month

% Participation by offering for May:

- Group Exercise – 57.8%
- Special Events – 16.4%
- Video/Open Use/ Other – 11%
- Coaching – 9.7%
- Seminars – 5.1%
- Facility Tours - 0%

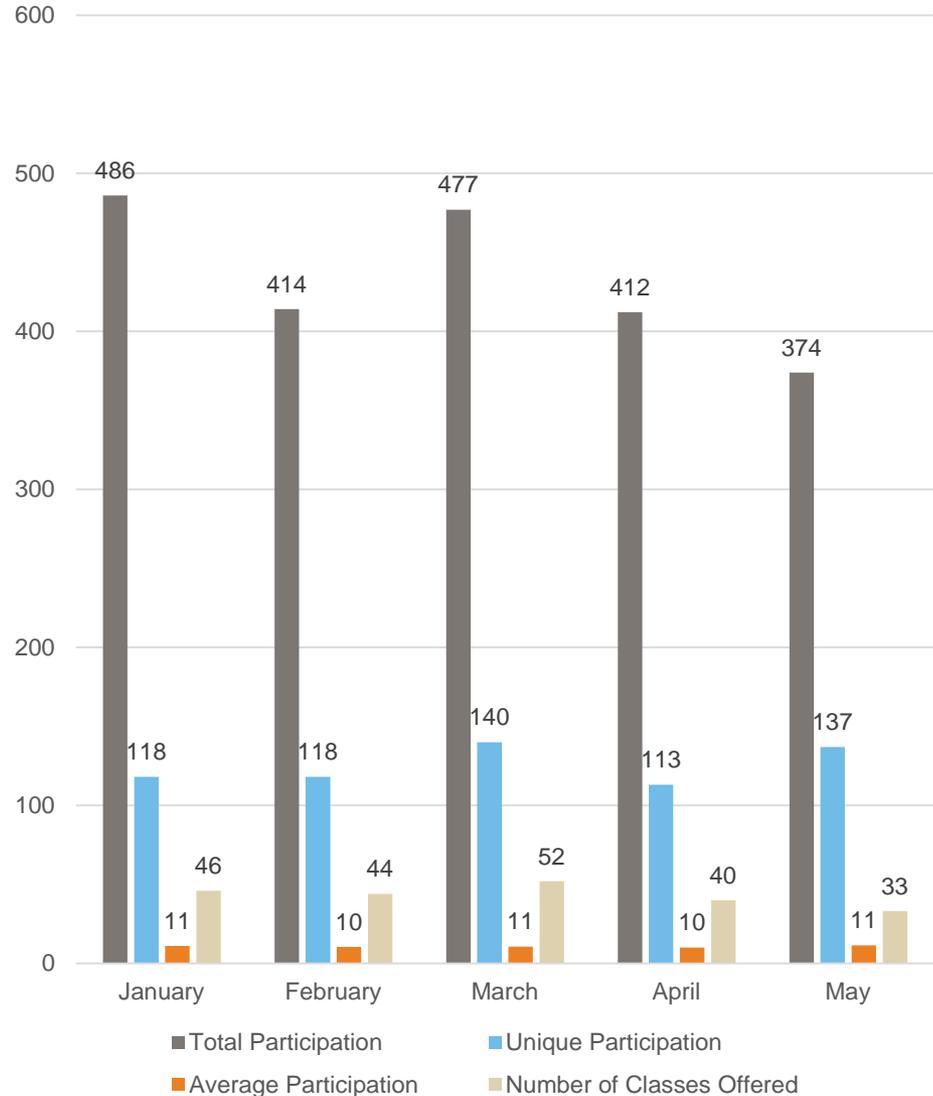
There has been an increase in health coaching due to the Healthy Weight Program. The resulted in a 75% increase when compared to May 2016.



Wellness Center – Group Exercise

There were a total of:

- 374 visits for group exercise for May. This is a decrease in 48% when compared to 2016.
- 11 average participants per group exercise class. This is an increase in 1 participant per class when compared to April 2017.
- A total of 33 classes were offered. This represents 12 fewer classes when compared to May 2016.



Wellness Center's 3rd Anniversary & New Name Celebration

On May 19th the Wellness Center celebrated its 3rd anniversary and the reveal of the new official name, Catherine Dodd Wellness Center. The celebration included a Well-Being Fair that showcased the Wellness Center and EAP resources. Interactive stations like the Nutrition Jeopardy, Play Your Way, Tai Chi Demo, Relaxation and Gratitude tables were also available. Within the 2-hour event, 106 participants attended the celebration.



Special Events in June at the Catherine Dodd Wellness Center include:

- 6/5 & 6/19 - *NEW* Meditation Classes
- 6/9 & 6/16 – DPH Back Injury Prevention Trainings
- 4 Wellness Coaching (6/13, 6/14, 6/27, & 6/28)
- Making Work Work Series (6/16, 6/23, 6/30, & 7/14)



BACK INJURY PREVENTION
 June 9, 2017 | 12:10 – 12:55pm
 June 16, 2017 | 2:00 – 3:00 pm

LOCATION:
 SFHSS Wellness Center
 1145 Market Street, Suite 100
 San Francisco, CA 94103
 (415) 854-0643

PRESENTED BY: Nancy Terranova, Department of Public Health

This 60-minute DPH Back Injury Prevention training class will teach you to recognize injury risk factors, how to protect your upper extremities and safe lifting techniques.

Course content is appropriate for workers interested in learning general body mechanics to help approach the physical demands of their job safely. The course does not address patient lifting techniques.

NO RSVP REQUIRED.
 WITH SUPERVISOR APPROVAL, EMPLOYEES CAN USE WORK TIME TO ATTEND THIS TRAINING

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WELLNESS COACHING
 June 2017

Get the support you need to make your well-being goals come true. Work with the Wellness Coach one-on-one to identify practical strategies you can try such as increasing the number of fruits and vegetables you consume or obtaining ways to incorporate healthier food options into your daily diet. Discuss obstacles and learn more skills to be successful.

Call 415-554-0643 or email wellness@sfghs.org to schedule your FREE 20-minute appointment.

LOCATION:
 SFHSS Wellness Center
 1145 Market Street, Suite 100
 San Francisco, CA 94103
 (415) 554-0643

APPOINTMENTS AVAILABLE:
 June 13 & 14, 10:00am-2:00pm
 June 27 & 28, 10:00am-2:00pm

SAN FRANCISCO HEALTH SERVICE SYSTEM myhss.org/well-being

Come practice
MEDITATION
 June 5 & 19, 2017 | 12:10 – 12:55pm



LOCATION:
 SFHSS Wellness Center
 1145 Market Street, Suite 100
 San Francisco, CA 94103
 (415) 854-0643

Meditation reduces stress, calms your emotions, increases self-awareness, uplifts your mood and improves your concentration. Meditation is a powerful tool for accessing your creativity, your inner wisdom and developing your intuition.

Learn basic breathing techniques to energize your body. Give yourself the gift of silent, peaceful state of rest by exploring and understanding the basics of meditation practice (no religious influence).

Attend one or both sessions.

NO RSVP REQUIRED.

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MAKING WORK, WORK
 A Workshop Series For Employees



June 16, 23, 30 & July 14, 2017 | 12:10 – 12:55pm

These 4 skill-based workshops can help improve your work experience and sense of personal wellbeing.

Being able to manage stress and manage your own emotions is essential for wellbeing. Learning to communicate effectively and handle difficult people can have a positive impact on your work environment. Join EAP for these 4 counselor-facilitated workshops to learn and practice skills to make work, work for you.

WITH SUPERVISOR APPROVAL, EMPLOYEES CAN USE WORK TIME TO ATTEND THIS TRAINING

LOCATION:
 Wellness Center
 1145 Market Street, Suite 100
 San Francisco, CA 94103
 (800) 705-2351

RSVP REQUIRED:
<https://www.eventbrite.com/making-work-work-series-tickets-54516420002>

SAN FRANCISCO HEALTH SERVICE SYSTEM EMPLOYEE ASSISTANCE PROGRAM