

**MEMORANDUM**

**DATE:** June 8, 2023  
**TO:** Randy Scott, HSB President, and Members of the Health Service Board  
**FROM:** Abbie Yant, RN, MA Executive Director SFHSS  
**RE:** June 8, 2023, Director's Report

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**TRANSITION REPORTING AS COVID PUBLIC HEALTH EMERGENCY ENDS (see attachment)**

As the Public Health Emergency ends, SFHSS will transition from monthly Health Service Board updates to less frequent utilization reports. Should you have questions about COVID diagnosis, testing, or treatment, you can access information as noted below.

SFDPH

<https://sf.gov/topics/coronavirus-covid-19>

CDPH

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx>

If you have personal health concerns, contact your health provider. If you have coverage questions, please contact your health plan.

**BLACK OUT NOTICE REMINDER (see attachment)**

Blackout Period Timeframe

- The Blackout Period Competitive bid process for actuarial services and associated health benefit consulting services will commence on December 8, 2022, and conclude after the Health Service Board's final approval of the contract award in June 2023.
- The Blackout Period Annual Rates and Benefits for the 2024 plan year will commence on December 8, 2022, and will conclude after the Board of Supervisors' final approval of the health plan rates and benefits in July 2023.

**Health Care Affordability Advisory Committee**

that the Health Care Affordability Board has appointed Abbie Yant RN, MA, Executive Director SFHSS as an inaugural member of the Health Care Affordability Advisory Committee. As defined in [Health and Safety Code, Division 107, Part 2, Chapter 2.6](#), the Advisory Committee will provide input to the Board on a range of topics, including a statewide healthcare spending target and specific targets by healthcare sector and geographic region; the methodology for setting spending targets and adjustment factors to modify targets when appropriate; definitions of health care sectors; benchmarks for primary care and behavioral health spending; statewide goals for the adoption of alternative payment models and standards; quality and equity metrics; standards to advance the stability of the health care workforce; and other areas requested by the Board or the Office of Health Care Affordability.

**Racial Equity, Diversity & Inclusion Updates: Pride Month and Juneteenth**

SFHSS is continuing to engage our health plan partners in serving as a conduit for the needs of our membership, including those that identify as Black, Indigenous, and People of Color (BIPOC) and those that face disproportionate health inequities. SFHSS is leading with equity to support our membership in accessing the care they need when they need it, regardless of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status. In accordance with reporting requirements

# SAN FRANCISCO HEALTH SERVICE SYSTEM

Affordable, Quality Benefits & Well-Being

from the Office of Racial Equity and the Office of the Mayor, SFHSS submitted the bi-annual [Racial Equity Action Plan Progress Report](#) in May 2022. This presentation highlighted the San Francisco city-wide mandate and shared reporting on areas of focus in relation to strategic plan alignment. SFHSS is unique among departments in the city in that equity is engrained within the fabric of our mission, vision, values, and strategic goals. Our department will continue to uplift equity practices that are currently being implemented as well as learnings we wish to glean from other city partners doing this collaborative work.

At the citywide level, the San Francisco Pride 2023 celebration is taking place on June 24th and 25th with the theme *#LookingBackMovingForward*. At the heart of [Pride](#) is the [unifying message](#) of education, commemoration, and liberation of culture and people. The [San Francisco Office of Transgender Initiatives](#) works to advance equity for transgender and gender non-conforming people in alignment with the City's [Gender Inclusion Policy](#). We are inviting all staff and commissioners to learn about [why pronouns matter](#) or to take a [Transgender 101 Course](#) to strengthen your commitment to inclusion in support of our racial equity action planning efforts. On a national scale, [Juneteenth](#) is entering its third year as a federally recognized holiday, although it is the oldest nationally celebrated commemoration of the ending of slavery in the United States. The 19<sup>th</sup> of June specifically marks 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.

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## SAN FRANCISCO HEALTH SERVICE SYSTEM DIVISION REPORTS: June 2023

### HUMAN RESOURCES:

#### Position Control:

<b># of active employees</b>	<b>45</b>
<b># of vacancies</b>	<b>21</b>
• # of departures	0
• # of active recruitment	*9
• # of pre-recruitment analysis	12

(\*Sync ups with approved vacancy report)

#### Recruitments:

- 1210 Benefit Analyst (Regular Recruitment): Final selections are to be made the week of 6/5/23.
- 2594 EAP Counselor: Interviews to begin the week of 6/5/23.
- 1209 Benefits Technician (TPV): Pending interview panel selection.
- 9252 Communications Specialist (PCS): Pending MQ reviews.
- 1813 Sr. Benefits Analyst (TPV): Final selections are to be made the week of 6/5/23.

#### Promotions:

- 2822 Health Educator: Julisa Nunez – 5/15/2023

#### Retirement:

- **After 31.5 years of dedicated service to the City and County of San Francisco, Jeff Lintner, Sr. Employee Assistance Program (EAP) Counselor will be retiring on June 30.** Jeff is a licensed psychotherapist, certified Employee Assistance Professional, and Department

# SAN FRANCISCO HEALTH SERVICE SYSTEM

Affordable, Quality Benefits & Well-Being

of Transportation designated Substance Abuse Professional and started with the EAP in February of 1992 at DPH under Toxics where employees were offered unlimited counseling. At the height of the EAP, there were 7 Counselors, 2 Admin staff, and both a clinical and organizational development internship program. During the 10 years EAP was in DPH, Jeff was the Clinical Supervisor of EAP's Clinical Internship Program. Also, during this time, the EAP moved to short-term counseling and Jeff helped create, plan, and train EAP staff in the Solution-Focused Brief Therapy Model.

Due to extensive citywide budget cuts EAP's staff was reduced to 2 Counselors and 1 Admin staff. It then decided EAP would be better aligned with DHR's Workforce Development team. For the 10 years, EAP was with DHR Jeff continued to provide short-term counseling, management and organizational consultations, trauma response, mediation, and training for employees across the city system.

As the City moved to create a Well-Being program, the EAP moved to the Health Service System where it remains today. Jeff has been instrumental in helping re-tool SFHSS EAP's Mediation Program and train volunteer City employees for DHR's Peer Mediation Program. He has delivered several de-escalation trainings across the City system, helping employees handle potentially dangerous interactions by keeping themselves and the public safe.

Over his 31.5 years with the City Jeff has interacted with thousands of employees from the City's four employers either through 1:1 counseling, consultations, trauma response, or workshops. His institutional knowledge and tireless commitment to serving city employees in a time of need have impacted so many lives, earning him the respect of his superiors and peers. And, he has been able to retain a decent sense of humor.

On behalf of the entire department, we thank Jeff for his dedication and years of service to the City and County of San Francisco. Jeff is a cherished member of SFHSS, who will be greatly missed. We wish Jeff a very happy, healthy, and joyful retirement and much success on his upcoming adventure to hike the Camino de Santiago across Southern France and Northern Spain. Thank you, Jeff!

## **OPERATIONS:**

- Member Services staff handled 3,595 calls in May 2023. (May 2022--2,521 calls / May 2021--4,213 calls)
- Member Services conducted 441 retirement consultations in May 2023, a 55% increase in total retiree consultations from April 2023.
- Member Services conducted a department-specific New Hire seminar for 50 Human Services Agency members on May 2, 2023.
- Member Services staff worked more than 109 hours of mandatory overtime in May to reduce the delay in processing member enrollments during this time of low staffing.
- Communications were presented at DHR's May New Hire Orientation with 79 attendees to ensure new hires can get their questions addressed.
- Communication is leading the development of a new SFHSS website homepage with enhanced features to better educate Members and aid in navigation
- Operations submitted our 2nd report for the City's Digital Accessibility and Inclusion Standards stating we have completed our website audit and we have a plan to bring our website into compliance by the given deadline next year.

# SAN FRANCISCO HEALTH SERVICE SYSTEM

Affordable, Quality Benefits & Well-Being

- ESA submitted to City auditors census data for the General Accounting Standards Board Other Post Employment Benefits Valuation.
- ESA in partnership with Finance is working towards a new system solution for calculating rate contributions necessary for deductions and payments
- ESA continues work to systematically capture and transmit race/ethnicity data as required by CMS.
- ESA has completed the development to modify interface files to STRs and SFRs to fix production issues. Testing phase in progress.

## SFUSD Update

- Member Services continues to support SFUSD with a total of 314 interactions in May:
  - Inbound Calls: 130 (decrease of 38% from April 2023)
  - Outbound Calls: 145 (related to voicemails received and/or verification requests for processing)
  - Retiree Consultations: 29
  - In March, Member Services was notified of two groups of SFUSD members who were previously not identified as being eligible for health benefits (ACA & 1040). The Member Services team has processed all received applications for these two groups and continues to process work through any new applications as they are submitted.
- ESA is supporting SFUSD in addressing system issues by collaborating on test design and completing two rounds of testing.

## **FINANCE AND BUDGET:**

- Trust Audit by MGO for FYE 6/30/2023 started.
- Project to build a new process for detailed rates and benefits started. This new process will be used for the plan year 2024.

## **CONTRACTS:**

- Executed UnitedHealthcare EPO/PPO Agreement.
- Executed First Amendment to Blue Shield of California PPO Agreement.
- Completed Technology Marketplace procurement for SQL Database Developer Meadow Design for rate tables and calculator.
- Finalized negotiations for 2024 Delta Dental PPO Performance Guarantees.
- Completed annual insurance verifications for benefits, professional services agreements, and technology services agreements.

## **WELL-BEING: (see attachment)**

- EAP continues to work through the transition of the First Responder EAP services with the Specialty Providers (clinicians) and ComPsych.
- Executed Key Player quarterly training, "Supporting Employee Mental Health" with 60 in attendance.
- Produced "Navigating Your Mental Health and Emotional Well-Being Benefits" Webinar that included two SFHSS Well-Being/EAP team members and representatives from all health plans.

## **Attachments:**

- COVID-19 End of Public Health Emergency Update
- Black Out Notice
- Well-Being Monthly Report

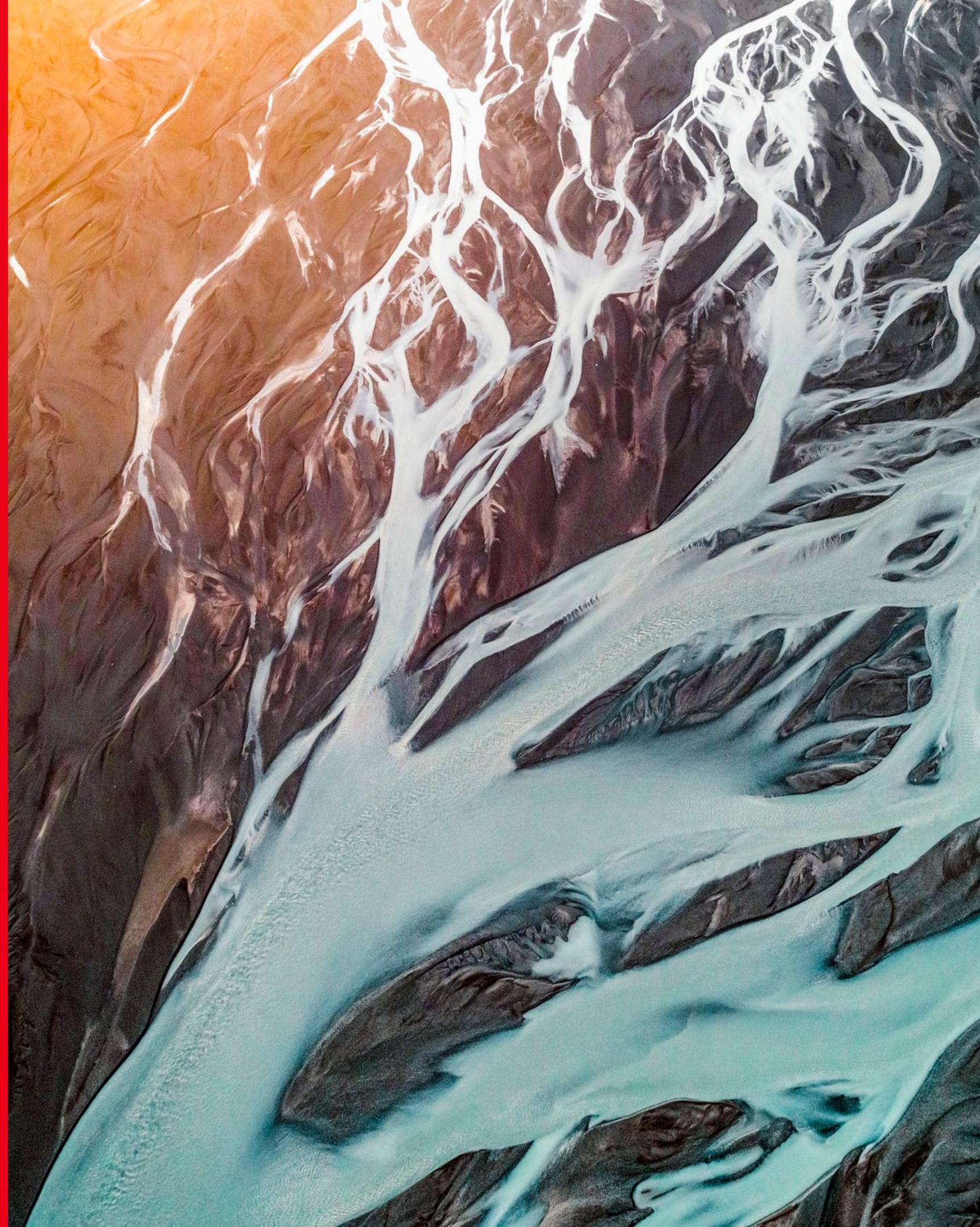
**AON**

**San Francisco  
Health Service  
System**

**Health Service  
Board**

COVID-19 End of Public  
Health Emergency Update

June 8, 2023



# End of the Public Health Emergency (PHE): Federal PHE Expired May 11, 2023

Group Health Plans <u>During PHE</u>	Options <u>after May 11, 2023</u>
<p><b>MUST COVER COVID-19 TESTING</b></p> <ul style="list-style-type: none"> <li>• Over-the-counter</li> <li>• In- and out-of-network</li> <li>• At no cost</li> </ul>	<p><b>COVID-19 TESTING</b></p> <ul style="list-style-type: none"> <li>• Continue to cover at no cost (i.e., stay the course)</li> <li>• Discontinue coverage</li> <li>• Cover COVID-19 tests in-network only</li> <li>• Impose cost-sharing on COVID-19 tests</li> </ul>
<p><b>MUST COVER COVID-19 VACCINATIONS</b></p> <ul style="list-style-type: none"> <li>• In- and out-of-network</li> <li>• At no cost</li> </ul>	<p><b>COVID-19 VACCINATIONS</b></p> <ul style="list-style-type: none"> <li>• Continue to cover at no cost out-of-network               <ul style="list-style-type: none"> <li>○ MUST cover in-network at no cost under ACA preventive care rules</li> </ul> </li> <li>• Discontinue out-of-network coverage</li> <li>• Impose out-of-network cost-sharing</li> </ul>

**Additional Resources:**

**End of Public Health Emergency**, <https://www.kff.org/coronavirus-covid-19/issue-brief/what-happens-when-covid-19-emergency-declarations-end-implications-for-coverage-costs-and-access/>

**The Federal COVID-19 PHE declaration will end on May 11, 2023**, <https://www.cdc.gov/coronavirus/2019-ncov/your-health/end-of-phe.html>

# End of the PHE: California

California’s Knox-Keene Act and Insurance Code apply COVID provisions differently to insured policies issued in California

**In accordance with California legislation, coverage for COVID-19 testing, treatment, and services will continue for an additional 6 months (beyond the termination of the federal PHE on May 11th).**

Covered Service	Group Health Plans <u>During PHE</u>	California <u>After the PHE</u>
<b>COVID-19 diagnostic testing and testing-related services (including OTC)</b>	Provide at no cost in- and out-of-network without prior authorization	<ul style="list-style-type: none"> <li>Provide at no cost in-network without prior authorization</li> <li><b>Six months after PHE:</b> Not required to cover out-of-network providers</li> </ul>
<b>COVID-19 vaccinations</b>	Provide at no cost in- and out-of-network	<ul style="list-style-type: none"> <li>Provide at no cost in-network without prior authorization as a preventive service</li> <li><b>Six months after PHE:</b> Not required to cover out-of-network providers</li> </ul>
<b>COVID-19 therapeutics</b>	Provide at no cost in- and out-of-network	<ul style="list-style-type: none"> <li>Provide at no cost in-network without prior authorization</li> <li><b>Six months after PHE:</b> Not required to cover out-of-network providers</li> </ul>

**Additional Resources:**

Governor’s Emergency Order, <https://www.chhs.ca.gov/end-of-covid-emergency/>

SF Public Health Emergency, <https://sf.gov/news/san-francisco-end-covid-19-public-health-emergency-declaration-and-health-orders>

# Action Items for End of the PHE

## 1. Monitor guidance from Agencies

## 2. Review written plan documents and amend to reflect plan sponsor's intent after end of PHE

- It is possible that PHE-related changes did not impact plan documents, and so amendments may be unnecessary

## 3. Confirm vendors and service providers will administer plans in accordance with SFHSS' intent following end of PHE

- Update policies or service agreements accordingly
- Relay effective dates of any reductions in coverage and coordinate with employee communications

## 4. Review prior employee communication materials: Do materials accurately communicate plan terms that will be in effect at end of PHE?

- It is possible that communications provided at the beginning of the PHE and/or plan year accurately described the coverage that would be in effect once the PHE ended
  - In this case, new communications might not be legally required
- Even if not legally required, SFHSS is considering providing new communication to prevent participant confusion

## 5. Provide updated employee communications (SMM, SPD, SBC, etc.)

- Comply with required notification timelines:
  - 60 days advance notice for changes to SBCs
  - Notice within 60 days after adoption of any reduction in health coverage
  - Notice generally required before 210 days after the end of the plan year in which the change is adopted

# Appendix

The following pages detail how the PHE ending will impact SFHSS' benefits program

<b>Impacted Benefit</b>	<b>Page</b>
<b>Early Rx Refills Availability</b>	6
<b>Tele-Medicine</b>	7
<b>Tele-Behavioral Health</b>	8
<b>Testing/Diagnostics</b>	9
<b>Treatment</b>	10
<b>Specialist and Primary Care</b>	11

# Early Prescription Refills

Early Rx Refills	BSC as of 05/31/2023	HealthNet as of 05/31/2023	Kaiser Non-Medicare as of 05/31/2023	Kaiser Medicare as of 05/31/2023	UHC Non-Medicare as of 05/31/2023	UHC Medicare as of 05/31/2023
<b>During PHE</b>	<b>HMO &amp; PPO:</b> Early refills not allowed; limit 1 course of therapy per 30 days.	Available	Promoted Mail-Order <b>CA:</b> Retail pharmacies can provide up to 100-day supply. <b>Non-CA:</b> Retail pharmacies can provide up to 90-day supply.		No	No
<b>After PHE</b>	<b>HMO &amp; PPO:</b> No Change; Early refills not allowed; limit 1 course of therapy per 30 days.	Will revert back to standard process of refills after 21 days	Requests for early refills on prescription medication will be subject to standard KP pharmacy guidelines (typically allowed once a year per patient per medication). Please note that early refills are not allowed for certain medications (controlled substances).		No	No

# Tele-Medicine

Tele-Medicine	BSC as of 05/31/2023	HealthNet as of 05/31/2023	Kaiser Non- Medicare as of 05/31/2023	Kaiser Medicare as of 05/31/2023	UHC Non- Medicare as of 05/31/2023	UHC Medicare as of 05/31/2023
<b>During PHE</b>	<b>HMO:</b> Primary care office visit copay would apply <b>PPO:</b> Primary care office coinsurance would apply	\$0 copay	\$0 copay	\$0 copay	<b>EPO &amp; PPO</b> \$0 copay	\$0 copay
<b>After PHE</b>	<b>No Change</b> <b>HMO:</b> Primary care office visit copay would apply <b>PPO:</b> Primary care office coinsurance would apply	Cost share mirrors in-person cost share based on type of services provided	No Change; \$0 copay	No Change; \$0 copay	<b>EPO</b> \$0 or <b>PPO</b> 15% copay	No Change; \$0 copay

# Tele-Behavioral Health

Tele-Behavioral Health	BSC as of 05/31/2023	HealthNet as of 05/31/2023	Kaiser Non-Medicare as of 05/31/2023	Kaiser Medicare as of 05/31/2023	UHC Non-Medicare as of 05/31/2023	UHC Medicare as of 05/31/2023
<b>During PHE</b>	<b>HMO &amp; PPO</b> Primary care office visit copay would apply	Covered at no cost	\$0 copay	\$0 copay	<b>EPO &amp; PPO</b> \$0	\$15 copay
<b>After PHE</b>	<b>HMO &amp; PPO</b> No Change; Primary care office visit copay would apply	Cost share mirrors in-person cost share based on the type of services provided	No Change; \$0 copay	No Change; \$0 copay	<b>EPO \$0 or PPO 15%</b>	No Change; \$15 copay

# Testing/Diagnostics

Testing/ Diagnostics	BSC as of 05/31/2023	HealthNet as of 05/31/2023	Kaiser Non- Medicare as of 05/31/2023	Kaiser Medicare as of 05/31/2023	UHC Non- Medicare as of 05/31/2023	UHC Medicare as of 05/31/2023
<b>During PHE</b>	<p><b>HMO:</b> \$0 cost-share for in- and out-of-network</p> <p><b>PPO:</b> \$0 cost-share for in- and out-of-network</p>	Covered at no cost both in- and out-of-network	Up to 8 OTC tests no charge, PCR testing \$0 copay	Up to 8 OTC tests no charge, PCR testing \$0 copay	\$0	Lab - \$0 copay
<b>After PHE</b>	<p><b>HMO:</b> \$0 cost-share for in-network indefinitely.</p> <p>\$0 cost-share for OON until November 11, 2023 (6 months after the End of the PHE). After November 11, 2023, cost-share will apply based on a members plan benefits for OON</p> <p><b>PPO:</b> Coverage and cost-share will apply based on a member's plan benefits for both INN and OON</p>	Covered at no cost in-network only	<p><b>CA:</b> No change in coverage. Details on coverage after the 6-month period ends will be shared at a later date.</p> <p><b>All other KP regions:</b> OTC test not covered, PCR testing – covered under outpatient diagnostic lab benefit at applicable plan cost sharing</p>	OTC test not covered, PCR testing – covered under outpatient diagnostic lab benefit at applicable plan cost sharing	\$25 or 15%	No Change; Lab - \$0 copay

# Treatment

Treatment	BSC as of 05/31/2023	HealthNet as of 5/31/23	Kaiser Non- Medicare as of 05/31/2023	Kaiser Medicare as of 05/31/2023	UHC Non- Medicare as of 05/31/2023	UHC Medicare as of 05/31/2023
<b>During PHE</b>	<p><b>HMO:</b> Cost-share applies based on members plan benefits</p> <p><b>PPO:</b> Cost-share applies based on member's in- and out-of-network plan benefits</p>	Covered at cost share	\$0 copay for OP prescriptions	\$0 copay for OP prescriptions	Per Plan benefits	Per Plan benefits
<b>After PHE</b>	<p><b>HMO:</b> Cost-share will continue to apply based on members plan benefits.</p> <p><b>PPO:</b> Coverage and cost-share will apply based on a member's plan benefits for both INN and OON plan benefits</p>	No Change; Covered at cost share	<p><b>CA:</b> No change in coverage. After the 6-month period ends, applicable copays will resume.</p> <p><b>All other KP regions:</b></p> <p>COVID-19 treatment will be covered under the drug benefit with applicable plan cost-sharing</p>	COVID-19 treatment will be covered under the Medicare Part B drug benefit with applicable plan cost-sharing	No Change; Per Plan Benefits	No Change; Per Plan Benefits

# Specialist and Primary Care

Specialist and Primary Care	BSC as of 05/31/2023	HealthNet as of 05/31/23	Kaiser Non-Medicare as of 05/31/2023	Kaiser Medicare as of 05/31/2023	UHC Non-Medicare as of 05/31/2023	UHC Medicare as of 05/31/2023
<b>During PHE</b>	<p><b>HMO:</b> Primary care / Specialist care office visit copay would apply</p> <p><b>PPO:</b> Primary care / Specialist care office visit coinsurance would apply</p>	Covered at cost share	No Charge	No Charge	<p><b>EPO</b> \$25 Primary/ \$30 Specialist or</p> <p><b>PPO</b> 15% Primary or Specialist</p>	\$5 Primary Care; \$15 Specialist
<b>After PHE</b>	<p><b>HMO:</b> No Change; Primary care / Specialist care office visit copay would apply</p> <p><b>PPO:</b> Primary care / Specialist care office visit coinsurance would apply</p>	No Change; Covered at cost share	<p><b>CA:</b> No change in coverage. After the 6-month period ends, applicable copays will resume.</p> <p><b>All other KP regions:</b></p> <p>Covered at applicable outpatient copays.</p>	Covered at applicable outpatient copays.	No Change; <b>EPO</b> \$25 Primary/ \$30 Specialist or <b>PPO</b> 15% Primary or Specialist	No Change; \$5 Primary Care; \$15 Specialist

## MEMORANDUM

**DATE:** December 8, 2022  
**TO:** Randy Scott, President, and Members of the Health Service Board  
**FROM:** Abbie Yant, RN, MA Executive Director SFHSS  
**RE:** Notice of the Black-Out Periods

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Pursuant to the Board's Policies, the Board must be notified of Blackout Periods. This memorandum shall notify the Health Service Board ("Board") of the San Francisco Health Service System ("SFHSS") Blackout Period in connection with:

1. The competitive bid process for actuarial services and associated health benefit consulting services and the
2. The Annual Rates and Benefits for the 2024 plan year

### Prohibited Communications

During these concurrent Blackout Periods, the Board is prohibited from any communications with potential SFHSS service providers on matters relating to SFHSS contracting for actuarial services or health plan benefits and administration, except communications on SFHSS matters during public meets of the Board or Board Committee Meetings.

Communications include face-to-face conversations, telephone conversations, emails, 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 Executive Director and the Board.

### Blackout Period Timeframe

The two blackout periods will overlap.

1. The Blackout Period **Competitive bid process for actuarial services** and associated health benefit consulting services will commence on December 8, 2022, and conclude after the Health Service Board's final approval in June 2023.
2. The Blackout Period **Annual Rates and Benefits** for the 2024 plan year will commence on December 8, 2022, and conclude after the Board of Supervisors' final approval of the health plan rates and benefits in July 2023.

# Well-Being Monthly Report

Health Service Board Meeting June 8, 2023

## Well-Being@Work Key Player Training Supporting Employee Mental Health

*May 10, 2023, 11:00am-12:00pm*

In support of Mental Health Awareness Month, the Well-Being Coordinators and Senior EAP Counselor, Jeannette Longtin, partnered to deliver a presentation to help support departments and their employees to break the stigma of mental health.

### Training Description:

Navigating and understanding your mental health benefits and the available resources can be challenging, especially when you are not feeling your best. When employees have the tools to manage their mental health, they feel more supported and engaged at work. Attend this training to learn how organizations can reduce the stigma about getting help and learn tips to create a workplace culture that prioritizes mental health.

### Training Objectives:

- Learn how you can lead your department in creating a stigma-free work environment.
- Gain tips to help build a workplace culture that prioritizes mental health.
- Receive information on SFHSS mental health benefits and resources

**Attendance: 60**

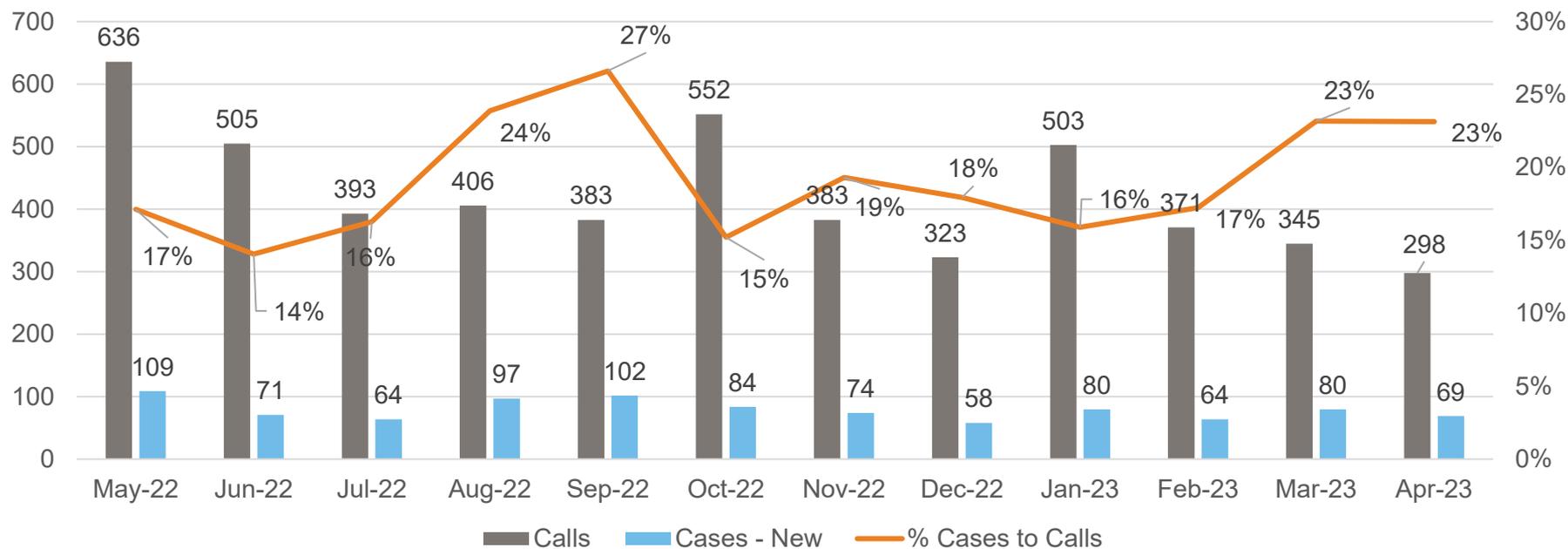
Mental  
Health  
Awareness  
Month 

Stigma-free Mental Health.  
Healing Begins with Conversations.

## Calls/Cases (12-month Period): Internal & External EAP

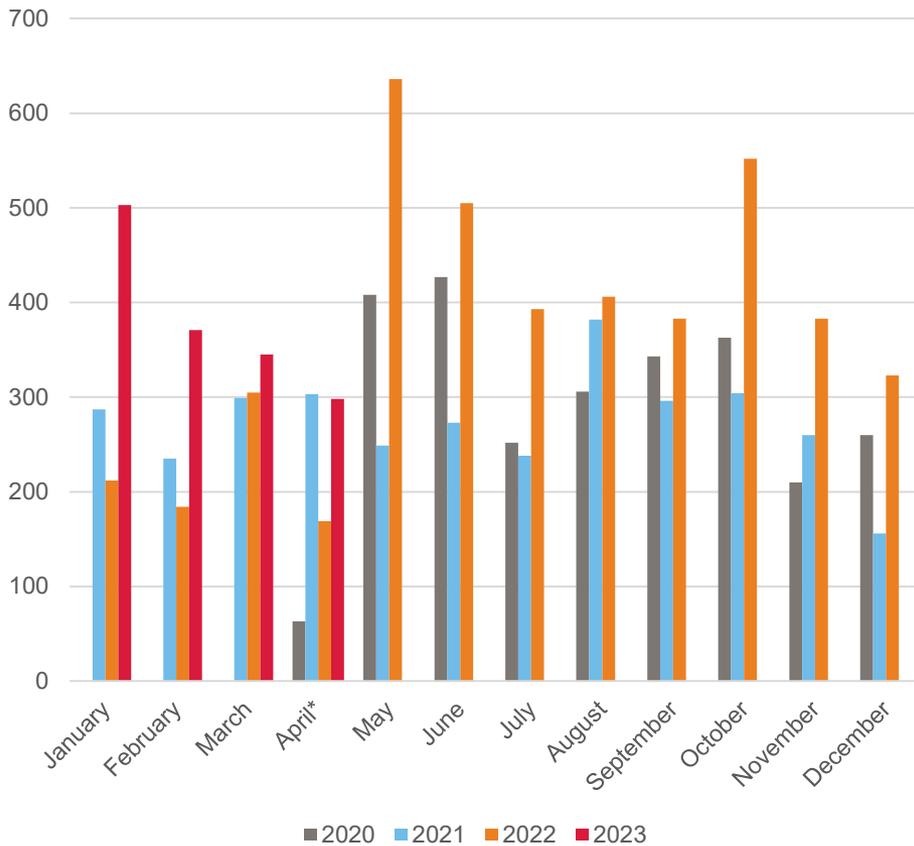
### Highlights:

- **Calls**
  - Compared to April 2022: 43% increase in calls
  - Compared to March 2023: -16% decrease in calls
- **Cases**
  - Compared to March 2022: 10% increase in cases
  - Compared to March 2023: -16% decrease in cases



## SFHSS EAP (Internal and External): Year Over Year

Year Over Year: Call Volume



Year Over Year: New Cases

