



HEALTH SERVICE BOARD

CITY & COUNTY OF SAN FRANCISCO

Randolph Scott
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Mary Hao
Vice President

Karen Breslin
Commissioner

Chris Canning
Commissioner

Supervisor Matt Dorsey
District 6
Commissioner

Stephen Follansbee, M.D
Commissioner

Claire Zvanski
Commissioner

Abbie Yant, MA, RN
Executive Director
Health Service System

Holly Lopez
Executive Secretary

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

HEALTH SERVICE BOARD

REGULAR MEETING MINUTES

Thursday, March 14, 2024, 1:00 p.m.
City Hall, Room 416
1 Dr. Carlton B. Goodlett Place
San Francisco, CA 94102

and

VIRTUAL PRESENTATION BY SFGOV TV and Webex

Remote Meeting Access

The Health Service Board welcomes public participation during public comment periods. There will be an opportunity for the general public to comment at the beginning of the meeting and on each discussion or action item on the agenda. Each comment is limited to 3 minutes. For those attending remotely, the Commission will hear up to 30 minutes of remote public comment total for each agenda item. Remote public comment from people who have received an accommodation due to disability will not count toward the 30-minute limit.

Watch at 1:00 p.m. on March 14, 2024 (via [SFGovTV schedule](#))

Click the link to join the meeting – [March 14, 2024 HSB Regular Meeting WebEx link](#)

Public Comment Call-In: 415-655-0001 / Access Code: 2660 408 1402 Webinar Password: 1145

Listening to the meeting via phone

1. Dial into **415-655-0001** and then enter **access code** 2660 408 1402, then #
2. Enter Webinar Password: 1145 then press #
3. Press *3 to enter the Public Comment queue, and you will hear the prompt, “You have raised your hand to ask a question; please wait to speak until the host calls on you.” When the system message says, “Your line has been unmuted,” - **THIS IS YOUR TIME TO SPEAK.**
4. You will be muted when your time to speak has expired.

Watching the meeting on WebEx

1. Join via hyperlink [March 14, 2024 HSB Regular Meeting WebEx link](#)
2. **Click on the Raise Hand Icon** to be placed in the queue to speak. A raised hand will appear next to your name. When you are unmuted in the system, a request to unmute will appear on your screen, please select unmute to speak.
3. When you are unmuted in the system, a request to unmute will appear on your screen, please select unmute to speak. Once you hear me say “Welcome Caller,” you can begin speaking.
4. When your time has expired, you will be muted. Please click on the Raise Hand Icon to lower your hand.

Members of the public are encouraged to state their name clearly, although you may remain anonymous. You will hear an audible warning when you have 30 seconds remaining. When your 3 minutes have ended, you will be placed back on mute.

Best Practices when Calling in for Public Comment:

- Call from a quiet location
- Speak slowly and clearly
- Turn down any televisions or radios around you
- Address the Commission as a whole; do not address individual Commissioners

Written Public Comment

Persons unable to attend the meeting may submit written public comments regarding an agenda item. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. Written public comments expected to be part of the official record should be submitted to the Board email, health.service.board@sfgov.org, and **received by 5 p.m. on Wednesday, March 13, 2024** before the meeting. Members can also call 628-652-4646 with any questions.

All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the body of your email, indicate the meeting date and the particular agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.

The Health Service Board meeting recording is available on the [March 14, 2024, HSB Meeting webpage](#). Recorded archives of regular board meetings are available on the [SFGovTV Health Service Board meeting webpage](#).

1. CALL TO ORDER:

2. ROLL CALL:

President Randy Scott-Excused
Vice President Mary Hao- Present
Commissioner Karen Breslin- Excused
Commissioner Chris Canning- Present
Supervisor Matt Dorsey- Present
Commissioner Stephen Follansbee, MD- Present
Commissioner Claire Zvanski- Present

3. GENERAL PUBLIC COMMENT – An opportunity for members of the public to comment on any matter within the Board’s jurisdiction that is not on the agenda, including requesting that the Board place a matter on a future agenda.

Written Public Comment:

Ella Lam, spouse of Retiree: Requested the Board to add the Kaiser Over-The-Counter benefits to the Kaiser Senior Advantage Plan.

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

[See the pdf of February 8, 2024, Health Service Board Regular Meeting Minutes Approved](#)
[See the pdf of December 12, 2023, Health Service Board Governance Committee Meeting Minutes Approved](#)

Commissioner Follansbee moved to approve the February 8, 2024, Health Service Board Regular Meeting Minutes and the December 12, 2023, Health Service Board Governance Committee Meeting Minutes. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Hao, Follansbee, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved the February 8, 2024, Health Service Board Regular Meeting Minutes and the December 12, 2023, Health Service Board Governance Committee Meeting Minutes.

5. PRESIDENT’S REPORT: (Discussion)

Vice President Hao said the agenda includes two closed-session items, and the Board will try to complete all agenda items today. Vice President Hao reminded the Board to complete Form 700 and the Ethics and Sunshine Training by April 2, 2024.

PUBLIC COMMENT: None

6. DIRECTOR’S REPORT: (Discussion)

[See the pdf of the March 14, 2024 Director’s Report](#)

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

Abbie Yant, SFHSS Executive Director, presented the following items:

- Blackout Notice Period November 9, 2023, through June 2024
- Medicare RFP Update
- SFHSS Facility Lease
- Health Service Board 2024 Election\
- 2024 Dependent Eligibility Verification Audit (DEVA) Pilot Update
- Equity and Inclusion Celebrations
- Artificial Intelligence
- Healthcare Affordability Board and Advisory Committee
- Divisional Reports
 - Human Resources Personnel
 - Operations
 - Enterprise Systems and Analytics
 - Member Services
 - Communications
 - Finance and Budget
 - Contracts
 - Well-Being

Executive Director Yant said the team will present the annual report next month and share detailed updates. Commissioner Follansbee said about three weeks ago, there was a hacking incident involving United Healthcare’s billing services. Executive Director Yant stated that she understood the major health systems were not affected; they primarily impacted smaller hospitals and individual providers. He asked if this event had any repercussions on HSS. Executive Director Yant said there hasn’t been any impact on HSS. HSS received all the necessary notifications, and UHC focused on properly informing us. It’s likely the most extensive healthcare breach, and federal authorities are investigating it. Executive Director Yant expressed her sympathy for those affected.

PUBLIC COMMENT: None

7. SFHSS FINANCIAL REPORT AS OF JANUARY 31, 2023: (Discussion)

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

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

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

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

Commissioner Follansbee pointed out that one of the Financial Report claims charts shows the disparity between the claims and the cumulative revenues, with the curve between the separating. The chart displays the expenses are always higher than the revenues, but from month to month, it looks like the gap hasn’t increased. He understood the shift might indicate a change occurred early on, but several plans seemed to be about the same dollars in the last month. Iftikhar Hussain said there are two reasons for the gap. One is the stabilization rate contribution, which lowers the revenue. The pro forma line adjusts for stabilization rate contribution. Second, the monthly

numbers are cumulative amounts. Commissioner Follansbee said the disparity (gap) wasn't increasing.

Iftikhar Hussain said the gap was high for the 2023 plan year but decreased in January as rates in 2025 were set higher due to the higher claims experience. Commissioner Follansbee asked if there could be month-by-month changes updated to see if there are seasonal trends. Commissioner Follansbee wanted the plans to know the Board is observing this trend. Executive Director Yant said HSS closely monitors the Trust's finances. Mike Clarke presented the experience and utilization trends we're observing, which are used to forecast future rates.

PUBLIC COMMENT: None

RATES AND BENEFITS

8. PRESENTATION OF THE 2024 RATES AND BENEFITS CALENDAR FOR THE PLAN YEAR 2025 BOARD EDUCATION: (Discussion)

[See the pdf of the Rates and Benefits Calendar Schedule for the Plan Year 2025](#)

No discussion.

PUBLIC COMMENT: None

9. REVIEW AND APPROVE 10-COUNTY SURVEY RESULTS FOR THE 2025 PLAN YEAR RATES: (Action)

[See the PDF of the 10-County Survey for the 2025 Plan Year Rates report](#)

[See the PDF of the 10-County Survey for the 2025 Plan Year Rates presentation](#)

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

- Recommendation
- 10-County Monthly Amounts

Iftikhar Hussain said SFHSS experienced a significant increase in insurance rates last year, also observed across most California counties. The ten-county average saw a 9.46% increase, compared to a more typical 3.21% the year before. For context, the Consumer Price Index (CPI) was 3.1% during this period, and the national benchmark ranged from 6.8% to 7%. California appears to be an outlier in these increases. Our goal in the negotiation process is to lower rates back down from the high level we saw for PY 2024.

Vice President Hao asked if there is any information behind, for example, Alameda's eye-popping 16.27% increase. Iftikhar Hussain said there weren't any patterns on certain types of plans, insurance, or carriers, so there was a broad increase across various projects and carriers.

Commissioner Follansbee asked if Kaiser had significant rate increases. Iftikhar said all plans had large increases. Supervisor Dorsey asked why California may be an outlier for rate increases. Iftikhar said he believes the California market is consolidated, especially in Northern California. Commissioner Follansbee said housing costs in many California counties are considerably higher than the national average, along with labor costs. Historically, both Los Angeles and Orange County have experienced notable increases. However, Northern California seems to have faced more significant challenges, with many rates remaining higher than those in Southern California. Iftikhar Hussain said historically, healthcare costs have been higher in Northern California, but it

appears that Southern California is now narrowing the gap and becoming more expensive. Mike Clarke said California's healthcare dynamics, especially with Kaiser Permanente, differ significantly from the rest of the country. While other health plans like Blue Cross, Blue Shield, United Healthcare, Aetna, Cigna, etc., negotiate contracts over several years with increases play over a two, three, or four-year period, Kaiser operates as an integrated system where most costs are incurred without a lag. This unique setup resulted in a catch-up effect due to pandemic-related wage inflation and bargaining, impacting 2024 renewals.

Commissioner Zvanski asked if Kaiser is only in California. Mike Clarke said Kaiser is predominantly in California. Still, there are also seven other geographic regions where Kaiser is offered across the country, and SFHSS offers three of those to its retirees in Washington, Oregon, and Hawaii. Iftikhar Hussain said about 90% of Kaiser is in California.

Commissioner Follansbee pointed out Northern California has experienced consolidation, especially in San Francisco, where we've seen further consolidation with St. Mary's and St. Francis Hospitals being acquired by UCSF. This has resulted in three primary health plans dominating the market, leading us to anticipate potential impacts from this consolidation. In some counties, there's only one major player in the hospital system, making this a significant challenge for us and others. Market consolidation is a critical issue. While switching between major insurers like United, Anthem, and Aetna offers similar provider networks, the integrated nature of Kaiser makes it dominate the market significantly. With nearly 60% of our active employees and early retirees opting for Kaiser, finding alternative providers would be challenging, exacerbating the consolidation problem.

Executive Director Yant said that she serves on the Healthcare Affordability Board Advisory Committee, which is provider-heavy and tends to favor rate increases. The current proposal is a 3% annual cap. We'll have to wait and see if affected parties contest this recommendation. The provider community is not in favor of such a stringent cap. Colleagues from the Purchasers Business Group on Health were in Washington recently, discussing the nationwide issue of rapidly increasing health plan rates with members of Congress and the Senate. This phenomenon is not limited to San Francisco or California; it's a nationwide concern.

Executive Director Yant recognized Yuriy Gologorskiy for his dedication and effort in preparing the 10 County Report.

Supervisor Dorsey moved to approve the 10-County Survey Results. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Hao, Follansbee, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved the 10-County Survey Results for the 2025 Plan Year Rates.

10. REVIEW AND APPROVE PROPOSED MODIFICATIONS TO JUNE 30, 2023, SELF-FUNDED AND FLEX-FUNDED HEALTH PLAN CONTINGENCY RESERVE AMOUNTS: (ACTION)

[See the PDF of the Approve the Proposed Modifications to June 30, 2023, Self-Funded and Flex-Funded Health Plan Contingency Reserve Amounts](#)

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

Mike Clarke, Aon presented the following items:

- Introduction—Basis for June 30, 2023, Contingency Reserve Modifications
- Background—HSB Contingency Reserve Policy 210
 - What is a Contingency Reserve? Think of It As The Trust's "Emergency Fund"
 - Contingency Policy Objectives—Protecting Unusually High Claim Experience
 - Contingency Policy—Health Plans Covered
 - Contingency Policy—Reserve Calculation Methodology
 - Contingency Policy—Confidence Intervals = Ranges of Deviation from Expected
 - Contingency Policy—Reserve Calculation Methodology
 - Required Liabilities Per Accounting Rules
 - How Contingency Reserves Are Reflected
- Medical Self-Funded/Flex-Funded Health Plans
 - Proposed Modified June 30, 2023, Contingency Reserves at 95th Percentile Confidence Interval
 - Illustration Example of Medical Contingency Reserve Amount Modification on Rate Stabilization Rate Card Portion for 2025- BSC HMO and UHC EPO Plans
- Dental Self-Funded Active PPO Plan
- Recommendations for HSB Action

Commissioner Zvanski asked for clarity on the difference between Policy 212 and Policy 213. Mike Clarke said Policy 212 is the SFHSS Incurred but Not Reported (IBNR) Reserve Policy, and Policy 213 is the policy that outlines how SFHSS will handle the receipt of legal settlement monies into future rates.

Commissioner Follansbee acknowledged the significance of maintaining a high Contingency Reserve, noting that it has never been touched at 99%. He speculated that even at 95%, it likely would not have been used, emphasizing the robustness of such a reserve. Commissioner Follansbee appreciated the discussion about potential catastrophic events that might necessitate accessing the reserve, finding it unusual yet reassuring that a 95% reserve is still considered strong. Commissioner Canning expressed his gratitude for the effort to make the complicated principles easier to understand.

Commissioner Canning moved to approve the following three items:

1. Approve the modification of the June 30, 2023, medical self-funded and flex-funded health plan contingency reserve amounts from those originally approved at the 99th percentile confidence interval amounts on January 11, 2024, to the 95th percentile confidence interval amounts captured on page 19 of this presentation document totaling \$17,992,721.
2. Amend the HSB Contingency Reserve Policy 210 on a one-time basis for the June 30, 2023, self-funded dental active PPO plan contingency reserve amount to be set to \$0.
3. Ask the Governance Committee of the HSB, then the full HSB, during 2024 to consider the elimination of the self-funded active dental PPO plan from HSB Contingency Reserve Policy 210.

Commissioner Follansbee seconded the motion.

PUBLIC COMMENT:

Dennis Kruger, Retired and Active Firefighters and Spouses, asked how the dental plan will change if this item is approved. Though Chair Hao, Mike Clarke explained that the funding method for the active employee dental PPO plan will not change. The plan is self-funded, and it will remain self-funded in the future.

Vice President Hao pointed out that the recommendation would be to remove the dental self-funded active PPO from Policy 210. Mike Clarke said the dental self-funded active PPO plan exposure is capped by the plan design annual benefit and lifetime orthodontic maximums, so there is no need for a contingency reserve plan on the dental plan, and there hasn't been any historical precedent for needing an emergency fund for a dental plan. Vice President Hao said the policy seems to be overabundantly cautious.

VOTE:

Ayes: Canning, Dorsey, Hao, Follansbee, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved 1. modification of the June 30, 2023, medical self-funded and flex-funded health plan contingency reserve amounts from those originally approved at the 99th percentile confidence interval amounts on January 11, 2024, to the 95th percentile confidence interval amounts captured on page 19 of this presentation document totaling \$17,992,721, 2. Amend the HSB Contingency Reserve Policy 210 on a one-time basis for the June 30, 2023, self-funded dental active PPO plan contingency reserve amount to be set to \$0. 3. the Governance Committee of the HSB, then the full HSB, during 2024 to consider the elimination of the self-funded active dental PPO plan from HSB Contingency Reserve Policy 210.

11. REVIEW SELF-FUNDED AND FLEX-FUNDED HEALTH PLANS 2023 EXPERIENCE: (Discussion)

[See PDF of Self-Funded and Flex-Funded Health Plans 2023 Experience](#)

Mike Clarke, Aon presented the following items:

- Today's 2023 Plan Experience Information—Background
- Today's 2023 Plan Experience Information—Summary
- Financial Experience Results — Non-Medicare BSC HMO and UHC EPO Plans
 - Non-Medicare BSC HMO and UHC EPO Plans 2023 Experience-Introduction
 - Current Plan Enrollment
 - Medical and Prescription Drug Costs
 - Key HMO Plans Cost and Utilization Drivers From BSC Reporting*
- Financial Experience Results — Non-Medicare HN CanopyCare HMO Plan
 - HN CC Flex-Funded Non-Medicare HMO Plan 2023 Experience-Introduction
 - HN CC Flex-Funded Non-Medicare HMO Plan 2023 Experience-Summary
 - 2023 versus 2022 — Per Employee/Retiree Per Month (PEPM) Basis
- Financial Experience Results — Non-Medicare PPO Plan (administered by BSC and UHC)
 - Non-Medicare PPO Plan 2023 Experience
 - 2023 versus 2022 — Per Employee/Retiree Per Month (PEPM) Basis
 - High-Cost Claimants, 2023 Versus 2022
 - Blue Shield PPO Data vs. Blue Shield HMO Data for SFHSS Populations
 - Blue Shield Prescription Drug PMPM Cost Changes (Jan-Sept Basis)
- Financial Experience Results — Delta Dental Active Employee Dental PPO Plan
 - Delta Dental Active Employee PPO Plan 2023 Experience
 - Preventive Dental Utilization Is Improving From 2022 to 2023
 - SmileWay Wellness Program Membership Is Increasing
 - 2023 Service Utilization by Network Dentist Type

No discussion on this item.

PUBLIC COMMENT: None

BREAK: 2:27-2:43 p.m.

ROLL CALL:

Vice President Mary Hao- Present
Commissioner Chris Canning- Present
Supervisor Matt Dorsey- Present
Commissioner Stephen Follansbee, MD- Present
Commissioner Claire Zvanski- Present

12. REVIEW AND APPROVE SUTTER LEGAL SETTLEMENT 2025 RECOMMENDED RATING BUY-DOWN ACTION PER HEALTH SERVICE BOARD POLICY 213 FOR BSC HMO AND UHC EPO AND NON-MEDICARE PPO PLANS: (Action)

[See PDF of the Review and Approve Sutter Legal Settlement 2025 Recommended Rating Buy-Down Action Per Health Service Board Policy 213 for BSC HMO and UHC EPO and Non-Medicare PPO Plans](#)

Mike Clarke, Aon presented the following items:

- Background — HSB Legal Settlement Policy 213
- Background — New HSB Legal Settlement Policy 213 (continued)
- Background – Recent Sutter Health Legal Settlement
- Calculations and 2025 Rating Buy-Down Recommendations- BSC HMO & UHC EPO Plans
- Calculations and 2025 Rating Buy-Down Recommendations- Non-Medicare PPO Plan
- Today's Recommendation

No discussion on this item. Commissioner Follansbee moved to approve the Sutter Legal Settlement 2025 Rating buy-down per Health Service Board Policy 213 for the Blue Shield of California HMO and the UHC EPO and the non-Medicare PPO plans. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Follansbee, Hao, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved the Sutter Legal Settlement 2025 Rating buy-down per Health Service Board Policy 213 for the Blue Shield of California HMO and the UHC EPO and the non-Medicare PPO plans.

13. REVIEW AND APPROVE VSP VISION FULLY INSURED 2025 RATES AND CONTRIBUTIONS: (Action)

[See PDF of the Review and Approve VSP Vision Fully Insured 2025 Rates and Contributions](#)

Mike Clarke, Aon presented the following items:

- Introduction- VSP Vision Fully Insured Rate Renewal
- Current 5-Year Agreement Background (2022-2026)

- 2025 VSP Vision Fully Insured Rate Renewal
- Recent Loss Ratio Experience
- Enrollment Shifts Into Premier Plan Since 2018
- Proposed Monthly 2025 Plan Year Rates and Premier Plan Member Contributions
- Projected Aggregate 2025 Premiums and Member Contributions
- Recommendation for HSB Action

No discussion on this item. Commissioner Canning moved to approve the VSP fully insured 2025 Rates and Contributions. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Follansbee, Hao, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved the VSP Vision Fully Insured 2025 Rates and Contributions.

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

PUBLIC COMMENT: None

GOVERNANCE COMMITTEE

The Committee Chair will give a brief update on matters discussed and/or recommendations made in this committee. The committee reviews, develops, and oversees governance policies and practices of the Health Service Board.

15. REVIEW AND APPROVE 2023 ANNUAL SELF-EVALUATION REPORT: (Action)

[See the PDF of the HSB 2023 Annual Self-Evaluation Report](#)

[See the PDF of the HSB 2023 Annual Self-Evaluation Report presentation](#)

Holly Lopez, Board Secretary, presented the following items:

- The Process and Self-Evaluation Areas
- Executive Summary Highlights
- Conclusion: Areas to Focus for 2024
- Recommendation

Vice President Hao noticed fluctuations in scores across different areas, but overall, we're moving in the right direction. She said the report highlighted concerns raised by a few Board members. She suggested that to ensure transparency and prompt resolution, any concerns regarding our Board's functioning should be communicated to our President for timely action and correction, preventing potential larger issues.

Commissioner Follansbee appreciated the Governance Committee's thorough evaluation and summary. Regarding concerns raised about adherence to policies by Commissioners, having served as Board President and been involved in such processes, he believed confidentiality

around interactions concerning policy violations should be maintained unless there's a recurring serious problem. He said this has not been an issue during his two terms as Board President.

Commissioner Canning moved to approve the 2023 Annual Self-Evaluation Report. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT:

Fred Sanchez, President of Protect Our Benefits: Commended the Board for their diligence and preparation, noting that they are well-prepared for meetings and have a strong understanding of the materials beforehand. Expressed appreciation for the accessibility of everyone from the Secretary to the Executive Director and believed that if the entire City operated as efficiently as this Board, there would likely be a significant surplus.

VOTE:

Ayes: Canning, Dorsey, Follansbee, Hao, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved the 2023 Annual Self-Evaluation Report.

16. REVIEW AND APPROVE THE 2023 BOARD EDUCATION REPORT AND BOARD EDUCATION PLAN FOR 2024: (Action)

[See the PDF of the HSB 2023 Board Education Report and HSB Board Education for 2024](#)

[See the PDF of the HSB 2023 Board Education Report and HSB Board Education for 2024 presentation](#)

Commissioner Follansbee moved to approve the Health Service Board 2023 Board Education Report and Board Education Plan for 2024. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Follansbee, Hao, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved the Health Service Board 2023 Board Education Report and Board Education Plan for 2024.

Vice President Hao used the privilege of the Chair to call agenda items 17 and 21 together.

17. VOTE ON WHETHER TO HOLD CLOSED SESSION TO REVIEW AND APPROVE 2023 ANNUAL EMPLOYEE PERFORMANCE EVALUATION REPORT: (Action)

Commissioner Canning moved to hold a closed session for the Annual Employee Performance Evaluation Report and a closed session for the Member Appeal. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Follansbee, Hao, Zvanski

Noes: None

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ACTION: The Health Service Board unanimously approved to hold closed sessions for the Annual Employee Performance Evaluation Report and a closed session for the Member Appeal.

The Health Service Board called the closed session for the Member Appeal first. The closed session for the employee performance evaluation was postponed until the April Health Service Board meeting.

CONVENE IN CLOSED SESSION

GOVERNMENT CODE SECTION 54957 (B)(1) AND SAN FRANCISCO ADMINISTRATIVE CODE 67.10(B): PUBLIC EMPLOYEE PERFORMANCE EVALUATION

18. REVIEW AND APPROVE 2023 ANNUAL EMPLOYEE PERFORMANCE EVALUATION:

(Action) Postponed to April Meeting

Presented by Governance Committee Chair Hao

EMPLOYEE AND POSITION: Abbie Yant, SFHSS Executive Director

DOCUMENTS ATTACHED: HSB 2023 Annual Employee Performance Evaluation

ACTION:

RECONVENE FROM CLOSED SESSION

19. VOTE TO ELECT WHETHER TO DISCLOSE ANY OR DISCUSSION HELD IN THE CLOSED SESSION: (San Francisco Administrative Code Section 67.12(a)) (Action): Postponed to April Meeting

Presented by Governance Committee Chair Hao

PUBLIC COMMENT:

VOTE:

ACTION:

20. POSSIBLE REPORT ON ACTION TAKEN IN THE CLOSED SESSION (Government Code Section 54957.1 and San Francisco Administrative Code Section 67.12(b)) (Action):

Postponed to April Meeting

Presented by Governance Committee Chair Hao

PUBLIC COMMENT:

VOTE:

ACTION:

REGULAR BOARD MEETING MATTERS

21. VOTE ON WHETHER TO HOLD CLOSED SESSION FOR MEMBER APPEAL (Action):

Presented by Vice President Hao

PUBLIC COMMENT: None

VOTE:

ACTION:

Closed session under California Constitution Article I, Section 1; the Confidentiality of Medical Information Act, California Civil Code §§ 56 et seq; and the Health Insurance Portability and Accountability Act, 42 U.S.C. §§ 1320d

22. CLOSED SESSION FOR MEMBER APPEAL (Action):

Presented by Vice President Hao

ACTION:

RECONVENE IN OPEN SESSION

23. VOTE TO ELECT WHETHER TO DISCLOSE ANY OR ALL DISCUSSION HELD IN CLOSED SESSION (San Francisco Administrative Code Section 67.12(a)) (Action):

Commissioner Canning moved to not disclose any discussion held in closed session. Commissioner Zvanski seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Follansbee, Hao, Zvanski

Noes: None

ACTION: The Health Service Board approved not to disclose any discussion held in closed session.

24. POSSIBLE REPORT ON ACTION TAKEN IN CLOSED SESSION (Government Code Section 54957.1 and San Francisco Administrative Code Section 67.12(b)) (Action):

Commissioner Zvanski moved to not report action taken in closed session. Commissioner Canning seconded the motion.

PUBLIC COMMENT: None

VOTE:

Ayes: Canning, Dorsey, Follansbee, Hao, Zvanski

Noes: None

ACTION: The Health Service Board unanimously approved to not disclose any action taken in closed session.

25. ADJOURNMENT: 4:38 p.m.

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

Summary of Health Service Board Rules Regarding Public Comment

1. There will be an opportunity for general public comment at the beginning of the meeting, and there will be an opportunity to comment on each discussion or action item on the agenda. A member may comment on any matter within the Board's jurisdiction as designated on the agenda.
2. A member of the public has up to three (3) minutes to make pertinent public comments.
3. Public Comment can be given in-person, remotely, or written.
4. Members may submit their comments by email to health.service.board@sfgov.org by 5 pm the day before the meeting start time. These comments will be made part of the official public record and shall be brought to the attention of the Health Service Board. All comments received by the deadline will be forwarded to Board members, summarized and read aloud by the Board Secretary during the specific agenda item, and included in the meeting minutes. In the subject line of your email, indicate the meeting date and the specific agenda item number. If you do not specify an agenda item, your emailed public comment will be read under general comment.
5. For those attending remotely, the Commission will hear up to 30 minutes of remote public comment total for each agenda item. Remote public comment from people who have received an accommodation due to disability will not count toward the 30-minute limit.

Knowing Your Rights Under the Sunshine Ordinance

Government's duty is to serve the public, reaching its decision in full view of the public. Commissions, boards, councils, and other agencies of the City and County of San Francisco exist to conduct the people's business. This ordinance assures that deliberations are conducted before the people and that City operations are open to the people's review. For more information on your rights under the Sunshine Ordinance or to report a violation of the ordinance, visit the Sunshine Ordinance Task Force website at <http://www.sfgov.org/sunshine>.

Summary of Health Service Board Rules Regarding Cell Phones and Pagers

The ringing and use of cell phones, pagers, and similar sound-producing electronic devices are prohibited at Health Service Board and committee meetings. The Chair of the meeting may order the removal of any person(s) in violation of this rule from the meeting room. The Chair of the meeting may allow an expelled person to return to the meeting following an agreement to comply with this rule. The complete rules are outlined in Chapter 67A of the San Francisco Administrative Code.

Disability Access and Accommodation

Regular Health Service Board meetings are held at City Hall, 1 Dr. Carlton B. Goodlett Place, in Hearing Room 416 at 1:00 PM on the second Thursday of each month. The closest accessible BART station is Civic Center, three blocks from City Hall. Accessible MUNI lines serving this location are #42 Downtown Loop and the #71 Haight/Noriega and the F Line to Market and Van Ness and the Metro stations at Van Ness and Market and Civic Center. For more information about MUNI accessible services, call (415) 923-6142. There is accessible parking in the vicinity of City Hall at Civic Center Plaza adjacent to Davies Hall and the War Memorial Complex. Accessible seating for persons with disabilities (including those using wheelchairs) will be available. To obtain a disability-related modification or accommodation, including auxiliary aids or services, to participate in the meeting, please contact Holly Lopez, at 628-652-4646 at least 48 hours before the meeting, except for Monday meetings, for which the deadline is 4:00 pm the previous Friday.

City Hall Room 416 is wheelchair accessible. This meeting will be broadcast and captioned on SFGovTV. Remote public participation is available upon request for individuals who cannot attend in person due to disability. Making a request to participate remotely no later than one (1) hour prior to the start of the meeting helps ensure the availability of the meeting link. Sign Language Interpretation is also available upon request. If requesting remote Sign Language Interpretation, please submit an accommodation request a minimum of 4 business hours prior to the start of the meeting. Allowing a minimum of 48 business hours for all other accommodation requests (for example, for other auxiliary aids and services) helps ensure availability. To request an accommodation, please contact Holly Lopez, holly.lopez@sfgov.org 628-652-4646.

To access the meeting remotely as an accommodation, please use [March 14, 2024 HSB Regular Meeting WebEx link](#) or call 415-655-0001. Please find instructions at the beginning of this agenda for how to use WebEx for the purposes of remote public comment.

Sensitivity to Chemical-based Products

To assist the City's effort to accommodate persons with severe allergies, environmental illnesses, multiple chemical sensitivity, or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to various chemical-based products. Please help the City accommodate these individuals.

Location of Materials

If any materials related to an item on this agenda have been distributed to the Health Service Board after the distribution of the agenda packet, those materials are available for public inspection at the Health Service System during normal office hours. For more information, please contact Holly Lopez at 628-652-4646 or email holly.lopez@sfgov.org. The following email has been established to contact all members of the Health Service Board: health.service.board@sfgov.org. Health Service Board telephone number: 628-652-4646

Lobbyist Registration and Reporting Requirements

Individuals and entities influencing or attempting to influence local legislative or administrative action may be required by the San Francisco Lobbyist Ordinance [SF Campaign & Governmental Conduct Code § 2.100] to register and report lobbying activity. For more information about the Lobbyist Ordinance, please contact the San Francisco Ethics Commission at 25 Van Ness Avenue, Suite 220, San Francisco, CA 94102; telephone (415) 252-3100; fax (415) 252-3112; web site www.sfgov.org/ethics.

Generative AI was used to summarize and clarify discussion points in the meeting minutes.