

MEMORANDUM

DATE: May 11, 2023
TO: Randy Scott, HSB President, and Members of the Health Service Board
FROM: Abbie Yant, RN, MA Executive Director SFHSS
RE: May 11, 2023, Director's Report

RATES AND BENEFITS CALENDAR (See Agenda Item #9)

The Rates and Benefits calendar for May addresses five action items: the May 11th meeting will cover two action items. The Health Service Board will hold a special meeting on May 25th to cover the remaining three action items.

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.

MAY IS MENTAL HEALTH AWARENESS MONTH

Our Well-Being team is focused on removing the stigma around mental health this month. Members are encouraged to take a pledge to be stigma-free and learn more about their mental health through an assessment that can guide them to resources. There are also several webinars and training where individuals will have the opportunity to learn about mental health resources, benefits, and how to recognize when someone needs help through online training and webinars.

The [SFHSS Mental Health Awareness Month](#) webpage has diverse tools and resources to help you create healthy routines and increase your overall sense of well-being. Many of today's common exercises of breathing, movement, and mindfulness can be traced back to the ancient practices of Qi Gong, Yoga, and Meditation. You can find these, and a wealth of other workshops, seminars, and classes featured on the [SFHSS Well-Being Calendar](#). SFHSS is also encouraging members to check in with their mental health using available EAP counseling and free mental health support apps through our health plans.

ASIAN AMERICAN PACIFIC ISLANDER HERITAGE MONTH

The month of May also pays tribute to the generations of Asian and Pacific Islanders who have enriched America's history, with AAPI encompassing a wide range of countries, ethnicities, nationalities, and identities. The month of May was chosen to memorialize the arrival of the first known Japanese immigrant to the U.S. on May 7, 1843, and to honor the completion of the transcontinental railroad built by as many as 20,000 Chinese workers on May 10, 1869. SFHSS is uplifting heritage events hosted by our City partners including [Weaving](#)

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[Stories](#), the San Francisco Public Libraries' celebration of Asian American, Native Hawaiian, and Pacific Islander Heritage featuring music, dance, film, and written word. The [Asian Art Museum](#) is also honoring AAPI Heritage Month through talks, performances, cooking demonstrations, and activities for the whole family. These events highlight ways to offer support to the AAPI community including stopping anti-Asian hate and building equity and inclusion for all.

END OF PUBLIC HEALTH EMERGENCY (see attachment)

<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>

California Governor's Emergency Order ending May 11, 2023

<https://www.chhs.ca.gov/end-of-covid-emergency/>

SFUSD- EMERGENCY STATUS

At the beginning of 2023, SFHSS Member Services established a dedicated call queue for USD members (both active and retirees) so that staff can prioritize these calls and monitor for new issues. The good news is that the number of USD-specific calls has been decreasing each month.

- Jan. 2023 – 458 calls
- Feb. 2023 – 342 calls
- Mar. 2023 – 260 calls
- Apr. 2023 – 210 calls

The number of calls rolling to voicemail, due to an agent not being available, is also decreasing:

- Jan. 2023 – 140 voicemails
- Feb. 2023 – 80 voicemails
- Mar. 2023 – 130 voicemails
- Apr. 2023 – 63 voicemails

For the recently discovered groups of ACA and 1040/hr. eligible members, USD has provided an initial group of enrollment applications. They are double-checking with impacted members to confirm whether they desire to enroll and have promised a send and final set of enrollments soon.

USD staff have begun weekly meetings that are partly focused on repairing the interface file linking the USD EmpowerSF system and the City's PeopleSoft system. SFHSS volunteered Rin Coleridge, Enterprise Systems and Analytics Director, to join the weekly calls to provide any assistance possible. Completion of the repairs necessary to reenable the interface is planned for mid-summer this year.

USD is hiring for a few staff benefits positions. SFHSS Member Services leadership has agreed to participate on the interview panel for these positions.

WEBINAR ANNOUNCED: UC BERKELEY & SFHSS ACO EVALUATION

This report is a follow-up to the Health Service Board education item that was presented in December of 2021 by Timothy T. Brown, Ph.D., M.A. Dr. Brown serves as Associate Adjunct Professor of Health Economics and the Associate Director for Research at the Berkeley Center for Health Technology. This ACO evaluation was conducted through a partnership with the Center for Healthcare Organizational Innovation Research (CHOIR) and the Berkeley Center for Healthcare Technology (BCHT), both based in the School of Public Health at the University of California, Berkeley. This research centers around the accountable care organizations that are part of SFHSS, specifically those that are administered by Blue Shield of California. This research was supported by the Peter G. Peterson Foundation via a grant from Catalyst for Payment Reform and the results of this study were recently published by [Health Services Research Journal](#).

As an extension of the Health Service Board education item, SFHSS is inviting Health Service Board Commissions and members of the public to tune into the May 17th [Partnering for High-Value Healthcare Webinar](#) to learn more about the Accountable Care Organization (ACO) partnership. Delivering high-quality care in a cost-effective way is a shared goal among many in the healthcare industry. Accountable Care Organization (ACO) models aim to do exactly that through coordinated care across providers and payers. Join experts from SFHSS, Blue Shield of California, UC Berkeley, and Catalyst for Payment Reform to hear about the key features of an ACO program that creates better care experiences for patients while saving costs.

SFHSS, UCB, BSCA & CPR PRESENT

Webinar ■

PARTNERING FOR HIGH-VALUE CARE

Expert Panelists



Abbie Yant
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Executive
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Health Service
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Tim Brown
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Associate Adjunct
Professor of Health
Economics and
the Associate
Director for
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**Alicia V.
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**Emily
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**Paul
Brown**
Area Vice
President,
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**Dr. Malaika
Stoll**
MD
Senior Medical
Director at
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California



**Leticia
Harris**
M.S
Senior Health
Program
Planner
San Francisco
Health Service
System

**SAN FRANCISCO HEALTH SERVICE SYSTEM
DIVISION REPORTS: May 2023**

HUMAN RESOURCES:

Position Control:

# of active employees	45
# of vacancies	22
• # of departures	1
• # of active recruitment	10*
• # of pre-recruitment analysis	11

(*Sync ups with approved vacancy report)

SFHSS received Civil Service Commission approval to proceed with the contract selection process to engage an external call center to supplement SFHSS Member Services staff for planned and unplanned surges. This has become necessary due to the challenges with hiring. We are gaining traction and are anticipating welcoming a number of new employees over the next several months.

OPERATIONS:

- Member Services staff handled 3,375 calls in April 2023. (April 2022 – 4,004/ April 2021 – 4,116 calls)
- During April, we experienced a 16% abandonment rate, with 694 member calls going to voicemail. Voicemails are being returned weekly during Saturday mandatory overtime.
- Member Services conducted 247 video/phone retirement consultations in April 2023.
- Member Services presented at DHR’s March New Hire Orientation with 75 attendees.
- Member Services conducted a Retirement seminar for 90 SFFD members.
- Member Services staff worked more than 111 hours of mandatory overtime in March to reduce the delay in processing member enrollments during this time of low staffing.
- Communications launched the Retiree Calculator tool to help members plan for the cost of benefits in their retirement.
- Communications audited the SFHSS website to complete part two of the City’s Digital Accessibility mandate. Staff is working with the selected contractor on global site changes to improve accessibility for members.
- ESA is working to meet Race/Ethnicity regulatory reporting requirements for the Medicare population.
- ESA has completed an upgrade to our Enterprise Content Management software for member files.

FINANCE AND BUDGET:

- Completed FYE 2023 9-month forecast
- Received \$34,343 payment from Sutter per the compliance review of the 2019 rate increase limit in the Development Agreement.

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CONTRACTS:

- Executed fifth amendment to the agreement with ComPsych Corporation for first responder employee assistance program (EAP) and critical incident support services.
- Executed Letter of Agreement for Kaiser wellness services.
- Executed 7th Amendment to the agreement with Merative for claims analytics and data feeds.
- Executed data sharing agreement for Health Net and Delta Dental (SmileWay).
- Administered the outreach and selection process for Tier 3 Technology Marketplace supplier Meadow Design for SQL database development services.

WELL-BEING: (see attachment)

- Kicked off the Mental Health Campaign for Mental Health Awareness Month 5/1
- Effective 5/1, transitioned of the First Responder EAP services to ComPsych
- Developed communications, department toolkit and executed training for 17 city departments engaging in a physical activity challenge pilot, Well Traveled.
- EAP call volume is down –8% and cases are up +20% compared to February 2023.

Attachments:

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

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

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.

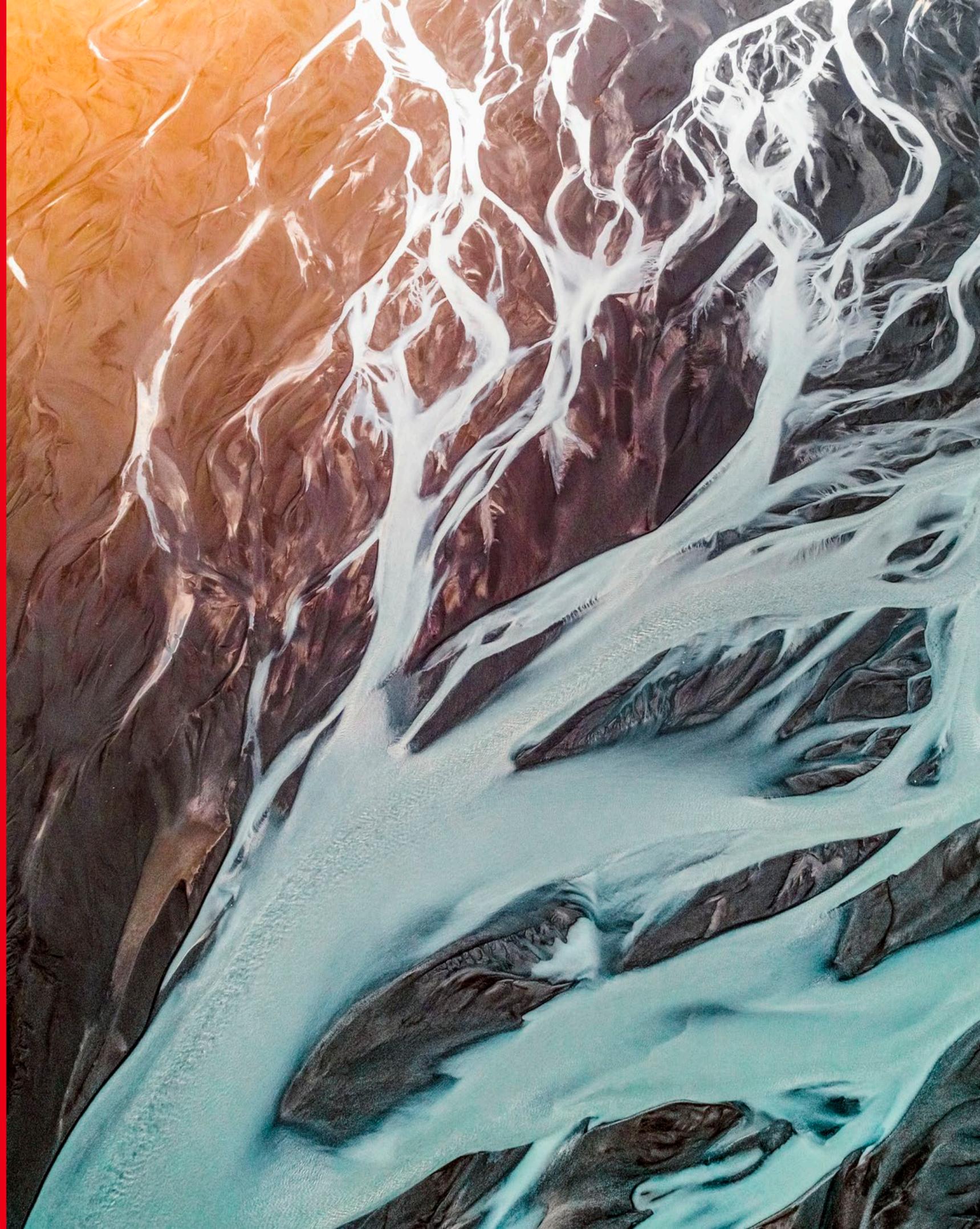
AON

**San Francisco
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System**

**Health Service
Board**

COVID-19 End of Public
Health Emergency Update

May 11, 2023



End of the Public Health Emergency (PHE): Federal PHE Set to Expire May 11, 2023

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

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>
COVID-19 diagnostic testing and testing-related services (including OTC)	Provide at no cost in- and out-of-network without prior authorization	<ul style="list-style-type: none"> Provide at no cost in-network without prior authorization Six months after PHE: Not required to cover out-of-network providers
COVID-19 vaccinations	Provide at no cost in- and out-of-network	<ul style="list-style-type: none"> Provide at no cost in-network without prior authorization as a preventive service Six months after PHE: Not required to cover out-of-network providers
COVID-19 therapeutics	Provide at no cost in- and out-of-network	<ul style="list-style-type: none"> Provide at no cost in-network without prior authorization Six months after PHE: Not required to cover out-of-network providers

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

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

Early Prescription Refills

Early Rx Refills	BSC as of 05/03/2023	HealthNet as of 05/03/2023	Kaiser Non-Medicare as of 05/03/2023	Kaiser Medicare as of 05/03/2023	UHC Non-Medicare as of 05/03/2023	UHC Medicare as of 05/03/2023
During PHE	HMO & PPO: Early refills not allowed; limit 1 course of therapy per 30 days.	Available	Promoted Mail-Order CA: Retail pharmacies can provide up to 100-day supply. Non-CA: Retail pharmacies can provide up to 90-day supply.		No	No
After PHE	HMO & PPO: 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 05/03/2023	HealthNet as of 05/03/2023	Kaiser Non- Medicare as of 05/03/2023	Kaiser Medicare as of 05/03/2023	UHC Non- Medicare as of 05/03/2023	UHC Medicare as of 05/03/2023
During PHE	HMO: Primary care office visit copay would apply PPO: Primary care office coinsurance would apply	\$0 copay	\$0 copay	\$0 copay	\$0 or 15% copay	\$0 copay
After PHE	No Change HMO: Primary care office visit copay would apply PPO: 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	No Change; \$0 or 15% copay	No Change; \$0 copay

Tele-Behavioral Health

Tele-Behavioral Health	BSC as of 05/03/2023	HealthNet as of 05/03/2023	Kaiser Non-Medicare as of 05/03/2023	Kaiser Medicare as of 05/03/2023	UHC Non-Medicare as of 05/03/2023	UHC Medicare as of 05/03/2023
During PHE	HMO & PPO Primary care office visit copay would apply	Covered at no cost	\$0 copay	\$0 copay	\$25 or 15%	\$15 copay
After PHE	HMO & PPO 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	No Change; \$25 or 15%	No Change; \$15 copay

Testing/Diagnostics

Testing/ Diagnostics	BSC as of 05/03/2023	HealthNet as of 05/03/2023	Kaiser Non- Medicare as of 05/03/2023	Kaiser Medicare as of 05/03/2023	UHC Non- Medicare as of 05/03/2023	UHC Medicare as of 05/03/2023
During PHE	<p>HMO: \$0 cost-share for in- and out-of-network</p> <p>PPO: \$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
After PHE	<p>HMO: \$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>PPO: 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>CA: No change in coverage. Details on coverage after the 6-month period ends will be shared at a later date.</p> <p>All other KP regions: 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 05/03/2023	HealthNet as of 5/3/23	Kaiser Non- Medicare as of 05/03/2023	Kaiser Medicare as of 05/03/2023	UHC Non- Medicare as of 05/03/2023	UHC Medicare as of 05/03/2023
During PHE	<p>HMO: Cost-share applies based on members plan benefits</p> <p>PPO: 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
After PHE	<p>HMO: Cost-share will continue to apply based on members plan benefits.</p> <p>PPO: 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	COVID-19 treatment will be covered under the drug benefit with applicable plan cost-sharing	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 05/03/2023	HealthNet as of 5/3/23	Kaiser Non-Medicare as of 05/03/2023	Kaiser Medicare as of 05/03/2023	UHC Non-Medicare as of 05/03/2023	UHC Medicare as of 05/03/2023
During PHE	<p>HMO: Primary care / Specialist care office visit copay would apply</p> <p>PPO: Primary care / Specialist care office visit coinsurance would apply</p>	Covered at cost share	No Charge	No Charge	\$25 Primary/ \$30 Specialist or 15% Primary or Specialist	\$5 Primary Care; \$15 Specialist
After PHE	<p>HMO: No Change; Primary care / Specialist care office visit copay would apply</p> <p>PPO: Primary care / Specialist care office visit coinsurance would apply</p>	No Change; Covered at cost share	Covered at applicable outpatient copays.	Covered at applicable outpatient copays.	No Change; \$25 Primary/ \$30 Specialist or 15% Primary or Specialist	No Change; \$5 Primary Care; \$15 Specialist

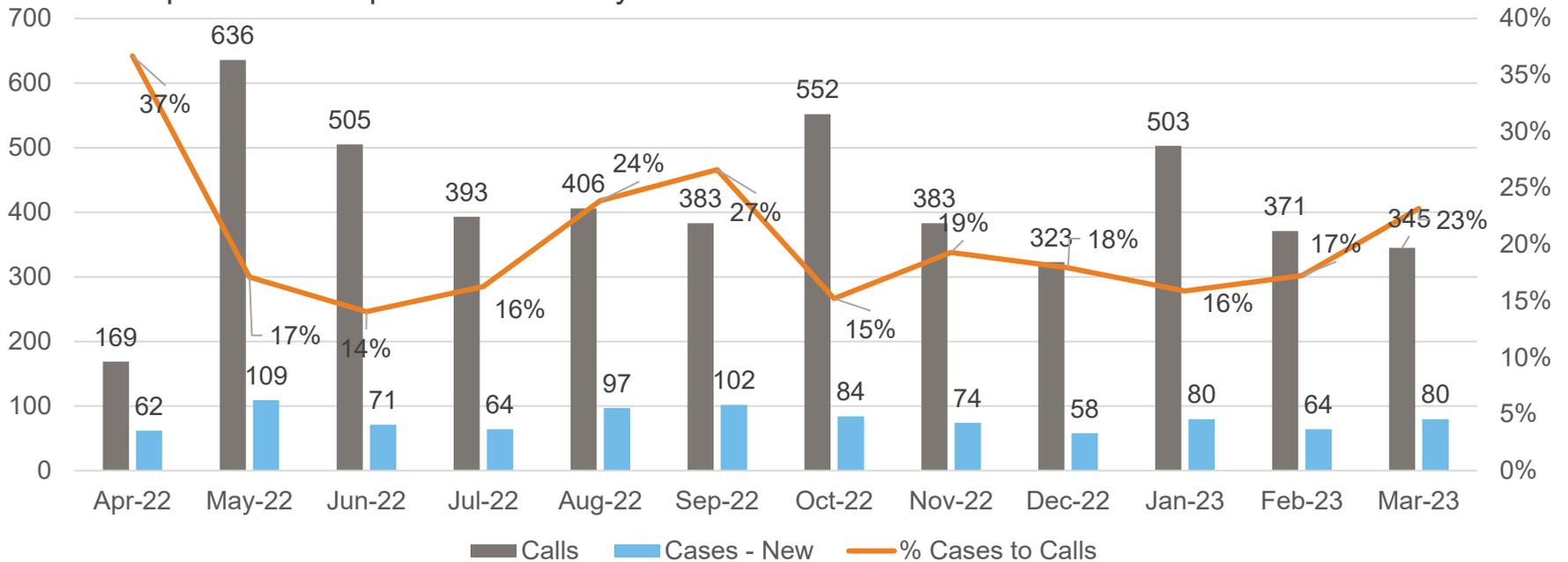
Well-Being Monthly Report

Health Service Board Meeting May 11, 2023

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

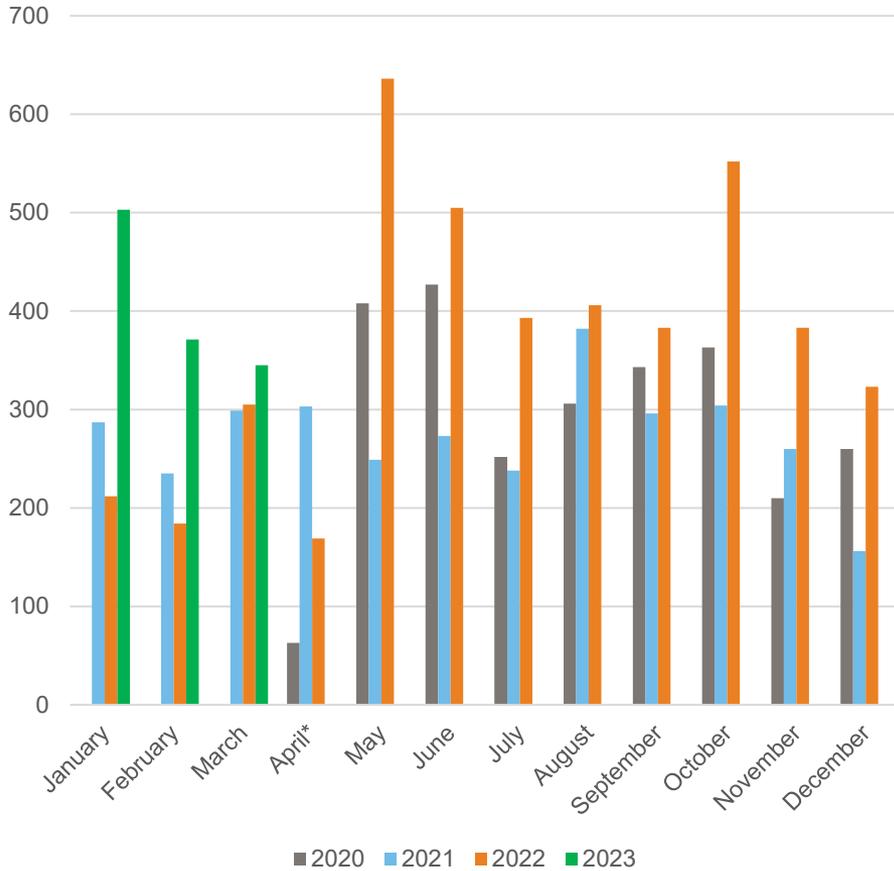
Highlights:

- **Calls**
 - Compared to March 2022: 12% increase in calls
 - Down: -8% compared to February 2023
- **Cases**
 - Compared to March 2022: -26.3% decrease in cases
 - Up: +20% compared to February 2023



SFHSS EAP (Internal and External): Year Over Year

Year Over Year: Call Volume



Year Over Year: New Cases

